

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NRCC

ADDRESS (number and street)

320 FIRST STREET SE

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00075820

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☒ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
03 01 2016

through

M M / D D / Y Y Y Y Y Y  
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Davis, Keith, A., ,

Type or Print Name of Treasurer

Signature of Treasurer

Davis, Keith, A., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NRCC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
03		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
03		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">30109835.61</td></tr></table>	30109835.61				
Y	Y	Y	Y	Y													
2016																	
30109835.61																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">39040733.41</td></tr></table>	39040733.41															
39040733.41																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">13965932.49</td></tr></table>	13965932.49					<table><tr><td colspan="5">26783505.16</td></tr></table>	26783505.16									
13965932.49																	
26783505.16																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">53006665.90</td></tr></table>	53006665.90					<table><tr><td colspan="5">56893340.77</td></tr></table>	56893340.77									
53006665.90																	
56893340.77																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">3016854.25</td></tr></table>	3016854.25					<table><tr><td colspan="5">6903529.12</td></tr></table>	6903529.12									
3016854.25																	
6903529.12																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">49989811.65</td></tr></table>	49989811.65					<table><tr><td colspan="5">49989811.65</td></tr></table>	49989811.65									
49989811.65																	
49989811.65																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**NRCC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
03	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

## (i) Itemized (use Schedule A).....

1698284.00

3558815.00

## (ii) Unitemized .....

785974.78

2389641.90

## (iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

2484258.78

5948456.90

## (b) Political Party Committees .....

0.00

0.00

## (c) Other Political Committees

(such as PACs).....

4833040.34

9318809.77

## (d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

7317299.12

15267266.67

## 12. Transfers From Affiliated/Other

Party Committees.....

2670428.09

5175429.47

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

3607.23

5790.88

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

3974598.05

6335018.14

## 18. Transfers from Non-Federal and Levin Funds

## (a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

## (b) Levin Funds (from Schedule H5) .....

0.00

0.00

## (c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

13965932.49

26783505.16

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

13965932.49

26783505.16

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2994371.75	6767524.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2994371.75	6767524.42
22. Transfers to Affiliated/Other Party Committees.....	16000.00	48000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	53500.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	170.00	2415.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	170.00	8415.00
29. Other Disbursements (Including Non-Federal Donations).....	6312.50	26089.70
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3016854.25	6903529.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3016854.25	6903529.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7317299.12	15267266.67
34. Total Contribution Refunds (from Line 28(d)) .....	170.00	8415.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7317129.12	15258851.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2994371.75	6767524.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3607.23	5790.88
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2990764.52	6761733.54

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: F3XA

Transaction ID :

The NRCC is submitting this amended report for April 20, 2016 to reflect that the contributor on page 608a originally reported as the American Gaming Association PAC should have been reported as the American Gastroenterological Association PAC. All payments reported on Line 21b are operating and administrative payments solely benefiting and on behalf of the NRCC. As such, they are not made on behalf of any specifically identified federal candidates, nor do they constitute public communications or voter drive activity containing express advocacy. Therefore, these disbursements are correctly reported on Schedule B for Line 21b, and do not require a Schedule B, Schedule E, or Schedule F for lines 23, 24 or 25. The Committee has reviewed all reimbursements for travel and subsistence and confirms all itemized memos are reported on Line 21b pursuant to the Commission regulations.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST.

City  
BELLINGHAM

State  
WA

Zip Code  
98225-2247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154240**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST.

City  
BELLINGHAM

State  
WA

Zip Code  
98225-2247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157092**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST.

City  
BELLINGHAM

State  
WA

Zip Code  
98225-2247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159315**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

225.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ABBE, ROSS, E., MR.,**

Mailing Address 2721 VICTOR ST.

City  
BELLINGHAM

State  
WA

Zip Code  
98225-2247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159316**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. ABERNATHY, JO-AN, , MS.,**

Mailing Address 24617 NE 142ND. AVE

City  
BATTLE GROUND

State  
WA

Zip Code  
98604-9181

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154276**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

**C. ABRAMOWITZ, KENNETH, S., MR.,**

Mailing Address P.O. BOX 958

City  
SOUTHPORT

State  
CT

Zip Code  
06890-0958

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NGN CAPITAL

Occupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143922**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1026.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ABRAMOWITZ, KENNETH, S., MR.,

Mailing Address P.O. BOX 958

City  
SOUTHPORT

State  
CT

Zip Code  
06890-0958

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NGN CAPITAL

Occupation (for Individual)  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146640

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. ACKER, KEITH, , MR.,

Mailing Address 20 WEST ST.

City  
CROMWELL

State  
CT

Zip Code  
06416-2139

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11.16138127

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. ADUSUMILLI, KRISHNA, , ,

Mailing Address 7815 S 6TH ST

City  
OAK CREEK

State  
WI

Zip Code  
53154-2023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OWENS INDUSTRIES, INC.

Occupation (for Individual)  
OWNER

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  
03 / 31 / 2016

Transaction ID : SA11.16161914

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).....▶

1350.00

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AGHABEG, DARREN, H., MR.,**

Mailing Address 1998 KOSTKA LANE

City  
GERMANTOWN

State  
TN

Zip Code  
38139-3448

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA METALS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142253**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**B. AHNGER, DON, , MR.,**

Mailing Address 2505 ANTHEM VILLAGE DR. E383  
E383

City  
HENDERSON

State  
NV

Zip Code  
89052-5505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIDWAY FORD TRUCK CENTER

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158411**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**C. AINES, PAUL, A., ,**

Mailing Address 950 F. ST NW  
SUITE 300

City  
WASHINGTON

State  
DC

Zip Code  
20004-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
EXECUTIVE VICE-PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155652**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1355.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AINLEY, PAT, A., MS.,**

Mailing Address P O BOX 3908

City  
CRESTLINE

State  
CA

Zip Code  
92325-3908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AINLEY ENTERPRISES LL

Occupation (for Individual)  
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153772**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. AINLEY, PAT, A., MS.,**

Mailing Address P O BOX 3908

City  
CRESTLINE

State  
CA

Zip Code  
92325-3908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AINLEY ENTERPRISES LL

Occupation (for Individual)  
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161996**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

**C. ALBANO, KATHERINE, , MS.,**

Mailing Address 2025 WAUKESHA RD

City  
CALEDONIA

State  
WI

Zip Code  
53108-9769

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDICAL COLLEGE OF WISCONSIN

Occupation (for Individual)  
MEDICAL PHYSICIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155693**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

310.00

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

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

FOR LINE NUMBER: PAGE 12 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ALDERSON, CARMEL, M., MS.,

Mailing Address 7510 MAISONS COURT

City  
INDIANAPOLISState  
INZip Code  
46278-1582FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137977

Amount of Each Receipt this Period

201.00

☐ Memo Item  
CONTRIBUTION

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

B. ALIFERIS, SCOTT, , ,

Mailing Address 9604 TIMBERVIEW COURT

City  
VIENNAState  
VAZip Code  
22182-4410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K&L GATESOccupation (for Individual)  
GOVERNMENT AFFAIRS ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

Transaction ID : SA11.16138271

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. ALLEN, ANDRIA, , MS.,

Mailing Address P.O. BOX 73

City  
SOUTH LANCASTERState  
MAZip Code  
01561-0073FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYPROOccupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136671

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

321.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ALLEN, ANDRIA, , MS.,

Mailing Address P.O. BOX 73

City  
SOUTH LANCASTER

State  
MA

Zip Code  
01561-0073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYPRO

Occupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142264

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

B. ALLEN, ANDRIA, , MS.,

Mailing Address P.O. BOX 73

City  
SOUTH LANCASTER

State  
MA

Zip Code  
01561-0073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYPRO

Occupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16149207

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

C. ALLEN, ANDRIA, , MS.,

Mailing Address P.O. BOX 73

City  
SOUTH LANCASTER

State  
MA

Zip Code  
01561-0073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYPRO

Occupation (for Individual)  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153915

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

340.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ALLEN, GERALD, , ,**

Mailing Address P.O. BOX 767

City  
FENCE LAKE

State  
NM

Zip Code  
87315-0767

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  
03 / 29 / 2016

**Transaction ID : SA11.16159356**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. ALLISON, ELISA, , ,**

Mailing Address 5815 DODDS DRIVE

City  
BETTENDORF

State  
IA

Zip Code  
52722-6536

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137811**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. ALLISON, ELISA, , ,**

Mailing Address 5815 DODDS DRIVE

City  
BETTENDORF

State  
IA

Zip Code  
52722-6536

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152439**

Amount of Each Receipt this Period

170.00

☐ Memo Item  
CONTRIBUTION

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

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

445.00

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

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

FOR LINE NUMBER: PAGE 15 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ALMAND, JACK, , ,

Mailing Address 3411 W. BUSCH BLVD.

City  
TAMPAState  
FLZip Code  
33618-4401FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154851

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. ALSAKER, DANIEL, L., MR.,

Mailing Address 2342 S BARKER RD

City

GREENACRES

State

WA

Zip Code

99016-9762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ALSAKER CORP

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148328

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

C. ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DRIVE  
502

City

MIAMI

State

FL

Zip Code

33133-4119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SOUTH MIAMI CRITICARE

Occupation (for Individual)

EMERGENCY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159309

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

5350.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DRIVE  
502

City  
MIAMI

State  
FL

Zip Code  
33133-4119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTH MIAMI CRITICARE

Occupation (for Individual)  
EMERGENCY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159310

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

B. ALVAREZ, IRMA, J., ,

Mailing Address 4201 BONITA ROAD  
146

City  
BONITA

State  
CA

Zip Code  
91902-1442

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158464

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. AMADEO, EMELIA, , ,

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16137644

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

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

530.00

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



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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AMADEO, EMELIA, , ,**

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137664**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. AMADEO, EMELIA, , ,**

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143603**

Amount of Each Receipt this Period

31.00

☐ Memo Item  
CONTRIBUTION

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

**C. AMADEO, EMELIA, , ,**

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143608**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

101.00

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

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

FOR LINE NUMBER: PAGE 18 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AMADEO, EMELIA, , ,**

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

**03 / 14 / 2016**

**Transaction ID : SA11.16146326**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

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

**B. AMADEO, EMELIA, , ,**

Mailing Address 104-60 QUEENS BLVD 22L  
APT 22L

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7322

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA11.16150349**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, ADRIAN, J., MR.,**

Mailing Address 1380 MARICE DRIVE APT 459  
APT 459

City  
SAINT PAUL

State  
MN

Zip Code  
55121-2145

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 ▼

300.00

Date of Receipt

**03 / 14 / 2016**

**Transaction ID : SA11.16145583**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

180.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, ADRIAN, J., MR.,**

Mailing Address 1380 MARICE DRIVE APT 459  
APT 459

City  
SAINT PAUL

State  
MN

Zip Code  
55121-2145

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150788**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138283**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139136**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 20 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139137**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16148816**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16148912**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

110.00

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

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

FOR LINE NUMBER: PAGE 21 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153576**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153579**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160276**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 22 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160277**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162533**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDERSON, EDWIN, , ,**

Mailing Address 6337 GLEN HOLLOW DRIVE

City  
LIBERTY TWP

State  
OH

Zip Code  
45011-0442

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 ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162535**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

105.00

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

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

FOR LINE NUMBER: PAGE 23 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANDERSON, JAMES, R., MR.,**

Mailing Address 9893 ENCLAVE DR.

City  
MINNETONKA

State  
MN

Zip Code  
55305-3121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138399**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. ANDERSON, SYDNEY, J., ,**

Mailing Address 1 MONTEREY TER.

City  
ORINDA

State  
CA

Zip Code  
94563-3130

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155322**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. ANDREWS, WILLIAM, F., MR.,**

Mailing Address 1409 MORAN RD

City  
FRANKLIN

State  
TN

Zip Code  
37069-6301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORRECTIONS CORP OF AMERICA

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150819**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

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

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

2225.00

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

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

FOR LINE NUMBER: PAGE 24 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ANTONIO, FRANKLIN, , MR.,**

Mailing Address 2765 CORDOBA COVE

City  
DEL MAR

State  
CA

Zip Code  
92014-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUALCOMM TECHNOLOGIES INC

Occupation (for Individual)  
CHIEF SCIENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16148913**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. ARAHA, LINDA, , MS.,**

Mailing Address 7525 MERKIEG AVE APT 318  
APT 506

City  
WEST SACRAMENTO

State  
CA

Zip Code  
95691-

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 ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156885**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. ARCINIEGA, MARIA, P., MS.,**

Mailing Address 116 PALMETTO ST  
APT 2R

City  
BROOKLYN

State  
NY

Zip Code  
11221-4987

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 ▼

521.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145032**

Amount of Each Receipt this Period

270.00

☐ Memo Item  
CONTRIBUTION

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

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

5370.00



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

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

FOR LINE NUMBER: PAGE 25 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. ARMOR, DAVID, J., DR.,**

Mailing Address 17246 PEPPERSTOCK LN

City  
JEFFERSONTON

State  
VA

Zip Code  
22724-1769

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  
03 / 14 / 2016

**Transaction ID : SA11.16146174**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. ARNOLD, DOYLE, L., MR.,**

Mailing Address 1439 E PERRYS HOLLOW DR.

City  
SALT LAKE CITY

State  
UT

Zip Code  
84103-4254

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159897**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. ASBURY, DAVID, H., MR.,**

Mailing Address 3438 PEACHTREE RD, SUITE 1100

City  
ATLANTA

State  
GA

Zip Code  
30326-1555

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NORTHWESTERN BENEFIT CORPORATION

Occupation (for Individual)  
OWNER

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  
03 / 10 / 2016

**Transaction ID : SA11.16143099**

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)..... ►

1000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. ASHLEY, JEAN, DOROTHY, MRS.,

Mailing Address 1330 UNIVERSITY DR. APT 22

City  
MENLO PARK

State  
CA

Zip Code  
94025-4241

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152503

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. ATKINS, RANDALL, W., MR.,

Mailing Address 50 PRIMROSE LANE

City  
SHERIDAN

State  
WY

Zip Code  
82801-9066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RAMACO WYOMING

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155658

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

C. ATKINS, VICTOR, KENNICOTT, MR., JR.

Mailing Address 6001 MONTE ROSA CT

City  
RENO

State  
NV

Zip Code  
89511-5051

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146101

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

1600.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AUDETTE, ALBET, , ,**

Mailing Address 400 MAIN ST., SUITE 800

City  
STAMFORD

State  
CT

Zip Code  
06901-3000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138211**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. AUSTIN, JUDY, , ,**

Mailing Address 11801 TRAILRIDGE DRIVE

City  
POTOMAC

State  
MD

Zip Code  
20854-2835

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135842**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. AVERY, WILLIAM, J., MR.,**

Mailing Address 417 GWYNEDD VALLEY ROAD

City  
GWYNEDD VALLEY

State  
PA

Zip Code  
19437-

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151760**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 28 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. AVILA, JORGE, , ,**

Mailing Address 1430 S HARBOR DR.

City  
MERRITT ISLAND

State  
FL

Zip Code  
32952-4606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIR LINES

Occupation (for Individual)  
PILOT

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  
03 / 31 / 2016

**Transaction ID : SA11.16162205**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. BAAKLINI, TOUFIC, , MR.,**

Mailing Address 606 UPHAM PL. N.W.

City  
VIENNA

State  
VA

Zip Code  
22180-4127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149127**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

**C. BACHMAN, BURL, V., MR.,**

Mailing Address 6209 SHELTER COVE POINTE

City  
MIDLOTHIAN

State  
VA

Zip Code  
23112-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RPAS, LTD.

Occupation (for Individual)  
PENSION ACTUARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135967**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

10325.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BACHMAN, BURL, V., MR.,**

Mailing Address 6209 SHELTER COVE POINTE

City  
MIDLOTHIAN

State  
VA

Zip Code  
23112-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RPAS, LTD.

Occupation (for Individual)  
PENSION ACTUARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148400**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. BACHMAN, BURL, V., MR.,**

Mailing Address 6209 SHELTER COVE POINTE

City  
MIDLOTHIAN

State  
VA

Zip Code  
23112-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RPAS, LTD.

Occupation (for Individual)  
PENSION ACTUARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159361**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**C. BACHMAN, BURL, V., MR.,**

Mailing Address 6209 SHELTER COVE POINTE

City  
MIDLOTHIAN

State  
VA

Zip Code  
23112-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RPAS, LTD.

Occupation (for Individual)  
PENSION ACTUARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162789**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 30 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BADIN, FADI, , MR.,

Mailing Address 2 WOODLAND DRIVE

City  
WOODLAND PARK

State  
NJ

Zip Code  
07424-3701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DERBALY & BADIN LLC

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16152495

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

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

B. BAILEY, ART, E., MR.,

Mailing Address 3232 NW GREENBRIAR

City  
PORTLAND

State  
OR

Zip Code  
97210-2715

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158523

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

C. BAILEY, ART, E., MR.,

Mailing Address 3232 NW GREENBRIAR

City  
PORTLAND

State  
OR

Zip Code  
97210-2715

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158525

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

3220.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 923

(check only one)

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

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

A. BAILEY, LAWRENCE, E., MR.,

Mailing Address 4 POND EDGE LANE

City  
IPSWICHState  
MAZip Code  
01938-1070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158911

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

B. BAILEY, LAWRENCE, E., MR.,

Mailing Address 4 POND EDGE LANE

City  
IPSWICHState  
MAZip Code  
01938-1070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158912

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

C. BAIRD, DAVID, , MR.,

Mailing Address 4281 EXPRESS LANE #L3147  
#L3147City  
SARASOTAState  
FLZip Code  
34238-2602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAESAR RITZ COLLEGESOccupation (for Individual)  
ADMISSIONS REGISTRAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146716

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

720.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BAIRD, DAVID, , MR.,**

Mailing Address 4281 EXPRESS LANE #L3147  
#L3147

City  
**SARASOTA**

State  
**FL**

Zip Code  
34238-2602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CAESAR RITZ COLLEGES**

Occupation (for Individual)  
**ADMISSIONS REGISTRAR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16146718**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
**CONTRIBUTION**

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

**B. BAK, DIRK, , MR.,**

Mailing Address 4737 COUNTY ROAD 101  
SUITE 250

City  
**MINNETONKA**

State  
**MN**

Zip Code  
55345-2634

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SDQ JANITORIAL**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03 / 10 / 2016**

**Transaction ID : SA11.16144906**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
**CONTRIBUTION**

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

**C. BAKER, STEWART, , ,**

Mailing Address P.O. BOX 980338

City  
**HOUSTON**

State  
**TX**

Zip Code  
77098-0338

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BREMOND COMPANY**

Occupation (for Individual)  
**PROPERTY MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**03 / 01 / 2016**

**Transaction ID : SA11.16135933**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
**CONTRIBUTION**

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

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

1600.00



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

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

FOR LINE NUMBER: PAGE 33 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BALLIET, BARRY, D., MR.,**

Mailing Address 213 ST. CHARLES PL.

City  
PITTSBURGH

State  
PA

Zip Code  
15215-1463

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PROVIDENT AGENCY INC.

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161774**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BALTER, HERBERT, , MR.,**

Mailing Address 33 SUNSET AVE

City  
VENICE

State  
CA

Zip Code  
90291-2516

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148020**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. BALTER, HERBERT, , MR.,**

Mailing Address 33 SUNSET AVE

City  
VENICE

State  
CA

Zip Code  
90291-2516

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149483**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 923  
(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)

**NRCC**

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

**A. BANKS, HAROLD, , MR.,**

Mailing Address P.O. BOX 697

City  
W FALMOUTHState  
MAZip Code  
02574-0697FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA11.16164061**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

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

**B. BARBE, CAROL, G., MRS.,**

Mailing Address 5665 GRACE WOODS DR. UNIT 110

City  
WILLOUGHBYState  
OHZip Code  
44094-8908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2016

**Transaction ID : SA11.16137339**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
 CONTRIBUTION

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

**C. BARNA, JOHN, F., MR.,**

Mailing Address 122 HEATHER COURT

City  
PALM DESERTState  
CAZip Code  
92260-6748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

**Transaction ID : SA11.16139039**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

276.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BARNEY, GAIL, , ,**

Mailing Address 22448 E. QUEEN CREEK RD

City  
QUEEN CREEK

State  
AZ

Zip Code  
85142-8920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144082**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BARTLETT, JOHN, G., MR.,**

Mailing Address 666 MIDDLE RT.

City  
GILMANTON

State  
NH

Zip Code  
03237-4219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAS-CON

Occupation (for Individual)  
MILLWRIGHT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155817**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**C. BARTLETT, ROBERT, , MR.,**

Mailing Address 1955 SLATESVILLE RD

City  
CHATHAM

State  
VA

Zip Code  
24531-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VIRKLER & BARTLETT LLC

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160487**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

675.00

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

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

FOR LINE NUMBER: PAGE 36 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BARTLETT, ROBERT, , MR.,**

Mailing Address 1955 SLATESVILLE RD

City  
CHATHAM

State  
VA

Zip Code  
24531-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VIRKLER & BARTLETT LLC

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160497**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. BAUMLER, JANE, H., MS.,**

Mailing Address 2127 MEADOW RDG

City  
REDDING

State  
CT

Zip Code  
06896-3223

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136133**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

**C. BAZIGIAN, HANK, R., MR.,**

Mailing Address 2 BARON PARK LN. APT. 26

City  
BURLINGTON

State  
MA

Zip Code  
01803-5423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORSEASONS SALES

Occupation (for Individual)  
FOOD BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152836**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

601.00

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

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

FOR LINE NUMBER: PAGE 37 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BEADLES, C.VICTOR, , ,**

Mailing Address P.O. BOX 3457

City  
**MOULTRIE**

State  
**GA**

Zip Code  
**31776-3457**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CANFOR BEADLES LUMBER**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 07 / 2016**

**Transaction ID : SA11.16138888**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

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

**B. BEAL, SANDRA, J., MS.,**

Mailing Address 3245 S ATLANTIC AVE  
1003

City  
**DAYTONA BEACH SHORES**

State  
**FL**

Zip Code  
**32118-6298**

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

**03 / 25 / 2016**

**Transaction ID : SA11.16154577**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
CONTRIBUTION

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

**C. BEAL, SANDRA, J., MS.,**

Mailing Address 3245 S ATLANTIC AVE  
1003

City  
**DAYTONA BEACH SHORES**

State  
**FL**

Zip Code  
**32118-6298**

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

**03 / 29 / 2016**

**Transaction ID : SA11.16158341**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item  
CONTRIBUTION

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

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

**325.00**

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BEAL, SANDRA, J., MS.,

Mailing Address 3245 S ATLANTIC AVE  
1003

City  
DAYTONA BEACH SHORES

State  
FL

Zip Code  
32118-6298

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  
03 / 29 / 2016

Transaction ID : SA11.16158342

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

B. BEAR, CATHERINE, NONA, ,

Mailing Address 23440 SOMERSET CROSSING PL

City  
ASHBURN

State  
VA

Zip Code  
20148-8094

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155654

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

C. BEAVER, LOIS, ANN, MRS.,

Mailing Address 4515 WILLARD AVE APT. S1809

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-3669

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOOD AND DRUG ADMINISTRATION

Occupation (for Individual)  
DIRECTOR OF INT'L HARMONIZATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142605

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

625.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BEAVER, LOIS, ANN, MRS.,

Mailing Address 4515 WILLARD AVE APT. S1809

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-3669

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOOD AND DRUG ADMINISTRATION

Occupation (for Individual)  
DIRECTOR OF INT'L HARMONIZATIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16155079

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. BEDESCHI, SILVIO, , ,

Mailing Address 3107 SUNSET BLVD

City  
STEUBENVILLE

State  
OH

Zip Code  
43952-2335

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 ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146067

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. BEDESCHI, SILVIO, , ,

Mailing Address 3107 SUNSET BLVD

City  
STEUBENVILLE

State  
OH

Zip Code  
43952-2335

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 ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16151284

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

1200.00

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

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BELL, BERNICE, E., MRS.,**

Mailing Address 211 S. COTTERELL DRIVE

City  
BOISE

State  
ID

Zip Code  
83709-0310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137343**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. BELL, CONSTANCE, , ,**

Mailing Address 166 S. BEACH ROAD

City  
HOBE SOUND

State  
FL

Zip Code  
33455-2507

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148156**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BELL, LOWRY, M., MS., JR.**

Mailing Address 150 NORTH SHORE POINT

City  
VERO BEACH

State  
FL

Zip Code  
32963-3726

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  
03 / 07 / 2016

**Transaction ID : SA11.16138984**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

275.00



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BELL, LOWRY, M., MS., JR.**

Mailing Address 150 NORTH SHORE POINT

City  
VERO BEACH

State  
FL

Zip Code  
32963-3726

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  
03 / 07 / 2016

**Transaction ID : SA11.16138987**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. BELL, LOWRY, M., MS., JR.**

Mailing Address 150 NORTH SHORE POINT

City  
VERO BEACH

State  
FL

Zip Code  
32963-3726

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  
03 / 24 / 2016

**Transaction ID : SA11.16153586**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BELL, LOWRY, M., MS., JR.**

Mailing Address 150 NORTH SHORE POINT

City  
VERO BEACH

State  
FL

Zip Code  
32963-3726

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  
03 / 31 / 2016

**Transaction ID : SA11.16161763**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

125.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BELL, MARTHA, R., MS.,**

Mailing Address 113 LEXINGTON DRIVE

City  
SILVER SPRING

State  
MD

Zip Code  
20901-2546

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  
03 / 29 / 2016

**Transaction ID : SA11.16159203**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BELLEW, DANIEL, , ,**

Mailing Address 2344 BLUE AVENUE

City  
ZANESVILLE

State  
OH

Zip Code  
43701-2003

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 ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139049**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BELLEW, DANIEL, , ,**

Mailing Address 2344 BLUE AVENUE

City  
ZANESVILLE

State  
OH

Zip Code  
43701-2003

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 ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154940**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

250.00

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

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BELLEW, DANIEL, , ,

Mailing Address 2344 BLUE AVENUE

City  
ZANESVILLEState  
OHZip Code  
43701-2003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16154946

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

B. BENAVIDES, GUSTAVO, O., MR.,

Mailing Address 281 RIVER COVE ROAD

City  
HUNTSVILLEState  
ALZip Code  
35811-8010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WYLE, INCOccupation (for Individual)  
ENGINEER / MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16155152

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. BENAVIDES, GUSTAVO, O., MR.,

Mailing Address 281 RIVER COVE ROAD

City  
HUNTSVILLEState  
ALZip Code  
35811-8010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WYLE, INCOccupation (for Individual)  
ENGINEER / MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160369

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BENGTON, BRUCE, P., MR.,**

Mailing Address 2 GAELSONG LANE

City  
WYOMISSING

State  
PA

Zip Code  
19610-3120

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158701**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**B. BENNING, FREDERIC, N., MR.,**

Mailing Address 18135 VINTAGE ST

City  
NORTHRIDGE

State  
CA

Zip Code  
91325-1052

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136718**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. BENSON, DALE, E., MR.,**

Mailing Address 6416 SW LOOP DR.

City  
PORTLAND

State  
OR

Zip Code  
97221-3385

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152372**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

305.00

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

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

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(check only one)

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

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

**A. BENSON, DALE, E., MR.,**

Mailing Address 6416 SW LOOP DR.

City  
PORTLAND

State  
OR

Zip Code  
97221-3385

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159230**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**B. BERG, CRYSTAL, , MS.,**

Mailing Address 1962 ROBINS RUN ROAD

City  
HARTFORD

State  
WI

Zip Code  
53027-9026

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160470**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BERGER, MATTHEW, A., DR.,**

Mailing Address 44 REYNOLDS ST.

City  
KINGSTON

State  
PA

Zip Code  
18704-4725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PSYCHIATRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146641**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

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

2555.00

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

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

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(check only one)

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

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

**A. BERLIN, MELVIN, R., MR.,**

Mailing Address 65 E GOETHE  
104

City  
CHICAGO

State  
IL

Zip Code  
60610-2628

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160554**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. BERNERO, EDWARD, , MR.,**

Mailing Address 8383 WILSHIRE BLVD.  
SUITE 400

City  
BEVERLY HILLS

State  
CA

Zip Code  
90211-2400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
WRITER/EXEC. PROD.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142855**

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION

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

**C. BERNSTEIN, DAVID, , DR.,**

Mailing Address 8975 CANYON RIDGE LANE

City  
CINCINNATI

State  
OH

Zip Code  
45249-2738

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160777**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 47 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BERNTSON, LARS, P., MR.,**

Mailing Address 224 DEER LN

City  
SLEEPY HOLLOW

State  
IL

Zip Code  
60118-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHICAGO IMPORTING COMPANY

Occupation (for Individual)  
FOOD DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138177**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BERNTSON, LARS, P., MR.,**

Mailing Address 224 DEER LN

City  
SLEEPY HOLLOW

State  
IL

Zip Code  
60118-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHICAGO IMPORTING COMPANY

Occupation (for Individual)  
FOOD DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16153027**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BERRYMAN, THOMAS, J., ,**

Mailing Address 17510 CAPISTRANO LN

City  
ORLAND PARK

State  
IL

Zip Code  
60467-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CINCINNATI INSURANCE GROUP

Occupation (for Individual)  
UNDERWRITER

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  
03 / 07 / 2016

**Transaction ID : SA11.16139830**

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)..... ►

350.00

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

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

FOR LINE NUMBER: PAGE 48 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BERWANGER, ADELE, , MS.,**

Mailing Address 323 APOLENA AVENUE

City  
NEWPORT BEACH

State  
CA

Zip Code  
92662-1217

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CANTERBURY CONSULTING

Occupation (for Individual)  
INVESTMENT CONSULTANT

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  
03 / 03 / 2016

**Transaction ID : SA11.16137067**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. BEST, THILO, , MS.,**

Mailing Address 701 S. HOWARD AVE.  
SUITE 106-392

City  
TAMPA

State  
FL

Zip Code  
33606-2473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAYSHORE RETIREMENT PARTNERS

Occupation (for Individual)  
REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143166**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

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

**C. BEZNOS, HAROLD, , MR.,**

Mailing Address 31731 NORTHWESTERN HIGHWAY  
250W

City  
FARMINGTON HILLS

State  
MI

Zip Code  
48334-1668

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162174**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1850.00



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

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

FOR LINE NUMBER: PAGE 49 OF 923

(check only one)

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

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

A. BIERY, VERA, D., MRS.,

Mailing Address 303 MADELINE AVE

City  
BLOOMFIELD

State  
IN

Zip Code  
47424-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146162

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

B. BINDER, ADELE, , MS.,

Mailing Address 225 SOUTH LAKE ST.  
SUITE 300

City  
PASADENA

State  
CA

Zip Code  
91101-3009

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  
03 / 10 / 2016

Transaction ID : SA11.16143161

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BING, D., GERALD, MS.,

Mailing Address P.O. BOX 487

City  
MINDEN

State  
NV

Zip Code  
89423-0487

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BING CONSTRUCTION

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153211

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

405.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BING, D., GERALD, MS.,

Mailing Address P.O. BOX 487

City  
MINDENState  
NVZip Code  
89423-0487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BING CONSTRUCTIONOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158601

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

B. BISHOP, BRENT, , MR.,

Mailing Address 293 SOUTH JOY DRIVE

City  
FARMINGTONState  
UTZip Code  
84025-2302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 31 / 2016

Transaction ID : SA11.16162539

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BITTINGER, FRANK, , MR.,

Mailing Address 15568 LACUNA DRIVE

City  
MONUMENTState  
COZip Code  
80132-6100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED ENGINEEROccupation (for Individual)  
RETIRED ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150340

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

460.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BLACK, ROBERT, , ,

Mailing Address 65 SOUTH BATTERY

City  
CHARLESTON

State  
SC

Zip Code  
29401-2325

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159018

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

B. BLAU, MICHAEL, , MR.,

Mailing Address 3435 NE RAPL POWELL RD.

City  
LEES SUMMIT

State  
MO

Zip Code  
64064-2361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE GROUP

Occupation (for Individual)  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16138402

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

C. BLEIBERG, PAUL, , MR.,

Mailing Address 2401 CALVERT STREET  
APARTMENT 321

City  
WASHINGTON

State  
DC

Zip Code  
20008-2662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHAEL TORREY & ASSOCIATES

Occupation (for Individual)  
DIRECTOR FEDERAL AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16155091

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 52 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BLOOM, ROBERT, W., MR.,

Mailing Address P.O.BOX 647

City  
GLEN ARBOR

State  
MI

Zip Code  
49636-0647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FBC INDUSTRIES, INC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160727

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. BOCCIO, FRANK, M., MR.,

Mailing Address P.O. BOX 1029

City  
REMSENBURG

State  
NY

Zip Code  
11960-1029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW YORK LIFE INSURANCE

Occupation (for Individual)  
CHIEF ADMINISTRATIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16138393

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

C. BOEHM, WILLIAM, , MR.,

Mailing Address P.O. BOX 7714

City  
P.O. BOX 7714

State  
CO

Zip Code  
81612-7714

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16154901

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

1200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 923

(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)

**NRCC**

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

**A. BOLSTER, ROBERT, P., ,**

Mailing Address P.O. BOX 109

City  
GEORGETOWNState  
MEZip Code  
04548-0109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

**Transaction ID : SA11.16146256**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

**B. BOLTON, DWAYNE, , ,**

Mailing Address 1345 SOUTH CAPITOL STREET, SW, 228

City  
WASHINGTONState  
DCZip Code  
20003-3574FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDISON INTERNATIONALOccupation (for Individual)  
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

**Transaction ID : SA11.16155854**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

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

**C. BOND, FRANK, , MR.,**

Mailing Address 6339 BUNKER CIRCLE

City  
ROANOKEState  
VAZip Code  
24019-6101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAYMES BROTHERS INCOccupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2016

**Transaction ID : SA11.16143848**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1110.00

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

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

FOR LINE NUMBER: PAGE 54 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BOND, FRANK, , MR.,**

Mailing Address 6339 BUNKER CIRCLE

City  
ROANOKE

State  
VA

Zip Code  
24019-6101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAYMES BROTHERS INC

Occupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162336**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. BONN, BARTON, D., MR.,**

Mailing Address 1403 FARNAM ST.  
SUITE 306

City  
OMAHA

State  
NE

Zip Code  
68102-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
MERCHANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139381**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. BOONE, PRISCILLA, , ,**

Mailing Address 4163 OAK PLACE DRIVE

City  
WESTLAKE VILLAGE

State  
CA

Zip Code  
91362-5129

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158491**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

5050.00

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

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

FOR LINE NUMBER: PAGE 55 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BORGERDING, GEORGE, , MR.,**

Mailing Address P.O. BOX 189

City  
**BELGRADE**

State  
**MN**

Zip Code  
**56312-0189**

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

**03 / 21 / 2016**

**Transaction ID : SA11.16150239**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

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

**B. BORLAND, JEAN, , ,**

Mailing Address 4731 COMPASS DR.

City  
**BRADENTON**

State  
**FL**

Zip Code  
**34208-8494**

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

**03 / 16 / 2016**

**Transaction ID : SA11.16147767**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

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

**C. BORNT, MARY, , MS.,**

Mailing Address 2307 E HIGHWAY 98

City  
**HOLTVILLE**

State  
**CA**

Zip Code  
**92250-9543**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**BORNT & SONS INC**

Occupation (for Individual)

**EXECUTIVE VP**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 13 / 2016**

**Transaction ID : SA11.16144733**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

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

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

**600.00**

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 56 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BOTTI, JOHN, D., ,

Mailing Address 151 21ST. ST. NW

City  
CANTONState  
OHZip Code  
44709-3907FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145072

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. BOUWMAN, EMILY, , MRS.,

Mailing Address 4754 CHARLESTON CT

City  
HOLLANDState  
MIZip Code  
49423-8719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141269

Amount of Each Receipt this Period

205.00

☐ Memo Item  
CONTRIBUTION

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

C. BOWER, MARCIA, , MS.,

Mailing Address 7414 E. CACTUS WREN RD.

City  
SCOTTSDALEState  
AZZip Code  
85250-4603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 07 / 2016

Transaction ID : SA11.16139015

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

355.00



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

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

FOR LINE NUMBER: PAGE 57 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BOWER, MARCIA, , MS.,

Mailing Address 7414 E. CACTUS WREN RD.

City  
SCOTTSDALE

State  
AZ

Zip Code  
85250-4603

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  
03 / 24 / 2016

Transaction ID : SA11.16153513

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

B. BOWMAN, ANN, H., MS.,

Mailing Address 89425 BARK POINT ROAD

City  
HERBSTER

State  
WI

Zip Code  
54844-4450

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148678

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

C. BOWMAN, ANN, H., MS.,

Mailing Address 89425 BARK POINT ROAD

City  
HERBSTER

State  
WI

Zip Code  
54844-4450

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158562

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 58 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BOWMAN, ANN, H., MS.,

Mailing Address 89425 BARK POINT ROAD

City  
HERBSTER

State  
WI

Zip Code  
54844-4450

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158564

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

B. BOWMAN, ANN, H., MS.,

Mailing Address 89425 BARK POINT ROAD

City  
HERBSTER

State  
WI

Zip Code  
54844-4450

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162754

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

C. BOWMAN, ANN, H., MS.,

Mailing Address 89425 BARK POINT ROAD

City  
HERBSTER

State  
WI

Zip Code  
54844-4450

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162755

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

75.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BOWMAN, DAVID, B., MR.,

Mailing Address P.O. BOX 41806

City  
TUCSONState  
AZZip Code  
85717-1806FEC 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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137979

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

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

B. BOYD, DEBBIE, , MRS.,

Mailing Address PO BOX 1739

City  
PORT LAVACAState  
TXZip Code  
77979-1739FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RLB CONTRACTING

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16169758

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

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

C. BRADEN, GWEN-ELLYN, , ,

Mailing Address 533 S VEACH AVENUE

City  
MANTECAState  
CAZip Code  
95337-5443FEC 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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153834

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

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

33511.00

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

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

FOR LINE NUMBER: PAGE 60 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BRADEN, GWEN-ELLYN, , ,

Mailing Address 533 S VEACH AVENUE

City  
MANTECAState  
CAZip Code  
95337-5443FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158228

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

B. BRADLEY, BETTY, M., MS.,

Mailing Address 321 EAST 54TH STREET  
4GCity  
NEW YORKState  
NYZip Code  
10022-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143061

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BRADLEY, BETTY, M., MS.,

Mailing Address 321 EAST 54TH STREET  
4GCity  
NEW YORKState  
NYZip Code  
10022-4933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143065

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

310.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRADLEY, BETTY, M., MS.,**

Mailing Address 321 EAST 54TH STREET  
4G

City  
NEW YORK

State  
NY

Zip Code  
10022-4933

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153433**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRADSHAW, SANDY, S., MRS.,**

Mailing Address 1305 E LONE PEAK DRIVE

City  
ALPINE

State  
UT

Zip Code  
84004-1962

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151283**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRADSHAW, SANDY, S., MRS.,**

Mailing Address 1305 E LONE PEAK DRIVE

City  
ALPINE

State  
UT

Zip Code  
84004-1962

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161655**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 62 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRAHAM, JAMES, W., ,**

Mailing Address 606 POPLAR CT

City  
PITTSBURGH

State  
PA

Zip Code  
15238-1344

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139406**

Amount of Each Receipt this Period

301.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRAMLETT, ROBERT, M., MR.,**

Mailing Address P.O. BOX 369

City  
ARDMORE

State  
OK

Zip Code  
73402-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE BRAMLETT AGENCY, INC

Occupation (for Individual)  
INDEPENDENT INSURANCE AGENT

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  
03 / 04 / 2016

**Transaction ID : SA11.16138121**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRAMSEN, JAMES, , ,**

Mailing Address 26 RIDGE RD

City  
BARRINGTON

State  
IL

Zip Code  
60010-9681

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPRAYING SYSTEMS INC

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156899**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

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

3051.00

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

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

FOR LINE NUMBER: PAGE 63 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRAND, DAVID, M., MR.,**

Mailing Address 114 GREEN LN

City  
HAVERFORD

State  
PA

Zip Code  
19041-2026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TARSA THERAPEUTICS

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143628**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRANDOW, ROBERT, H., MR.,**

Mailing Address 17 BRANDOW LN

City  
WEST BUXTON

State  
ME

Zip Code  
04093-3852

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147225**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRANGHAM, TAMI, , ,**

Mailing Address 732 E. RIALTO

City  
FRESNO

State  
CA

Zip Code  
93704-3112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIGHT AT HOME

Occupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139339**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

415.00

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

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

FOR LINE NUMBER: PAGE 64 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRAUTBAR, NACHMAN, , DR.,**

Mailing Address 10808 ASHTON AVE

City  
LOS ANGELES

State  
CA

Zip Code  
90024-5025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NACHMAN BRAUTBAR M.D INC

Occupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154715**

Amount of Each Receipt this Period

275.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRETHAUER, WILLIAM, D., MR.,**

Mailing Address 309 N BIRCH ST

City  
YUMA

State  
CO

Zip Code  
80759-1405

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16138058**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRETHAUER, WILLIAM, D., MR.,**

Mailing Address 309 N BIRCH ST

City  
YUMA

State  
CO

Zip Code  
80759-1405

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146092**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

625.00



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

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

FOR LINE NUMBER: PAGE 65 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BREWSTER, GEOFFREY, , MR.,

Mailing Address 6453 E. STALLION ROAD

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253-3151

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 ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152759

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

B. BRINSTER, LESLIE, , MR.,

Mailing Address 12849 49TH ST SW

City  
BELFIELD

State  
ND

Zip Code  
58622-9216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LESLIE BRINSTER WHEAT FARM

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16163473

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

C. BROIN, ROBERT, , ,

Mailing Address 3220 E. OLD ORCHARD TR.

City  
SIOUX FALLS

State  
SD

Zip Code  
57103-4861

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RMB ASSOCIATES

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162037

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

11050.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 66 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BRONNER, IRENE, R., MRS.,

Mailing Address P.O. BOX 264

City  
FRANKENMUTH

State  
MI

Zip Code  
48734-0264

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142464

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. BROOKS, EILEEN B., ,

Mailing Address 6365 SW 110TH STREET

City  
PINECREST

State  
FL

Zip Code  
33156-4065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHOENIX AMERICAN

Occupation (for Individual)  
ACCOUNTS PAYABLE CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158485

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BROOKS, HARRIET, B., MS.,

Mailing Address 329 ADELIA ST

City  
SPRINGFIELD

State  
IL

Zip Code  
62704-1629

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 ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145520

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

425.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BROWN, DAVID, G., DR.,

Mailing Address 950 TIMBER GLEN LN

City  
WILMINGTONState  
OHZip Code  
45177-2512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148330

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. BROWN, DIANTHA, G., MS.,

Mailing Address 763 TICONDEROGA AVE

City  
SEVERNA PARKState  
MDZip Code  
21146-3905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 25 / 2016

Transaction ID : SA11.16155170

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

C. BROWN, DIANTHA, G., MS.,

Mailing Address 763 TICONDEROGA AVE

City  
SEVERNA PARKState  
MDZip Code  
21146-3905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 25 / 2016

Transaction ID : SA11.16155397

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

1150.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BROWN, DONALD, R., MR.,

Mailing Address 240 CRAIG ROAD

City  
EDGERTONState  
WIZip Code  
53534-9348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANK OF MILTONOccupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153206

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

B. BROWN, DONALD, R., MR.,

Mailing Address 240 CRAIG ROAD

City  
EDGERTONState  
WIZip Code  
53534-9348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BANK OF MILTONOccupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154554

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. BROWN, EDWARD, M., LT. COL.,

Mailing Address 100 HIGH ST.

City  
WINDSORState  
CTZip Code  
06095-1161FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16151898

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

300.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BROWN, GORDON, L., MR.,**

Mailing Address 1212 RANCHO SERENA DR.

City  
KELLER

State  
TX

Zip Code  
76248-5717

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149238**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BROWN, JOANN, C., ,**

Mailing Address 872 WINDSOR GREEN DR.

City

FT MITCHELL

State

KY

Zip Code

41017-1396

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145224**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROWN, RANDY, , ,**

Mailing Address 13124 OAK CLIFF RD

City

OKLAHOMA CITY

State

OK

Zip Code

73120-8900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHILDRENS EYE CARE

Occupation (for Individual)  
PHYSICIAN

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  
03 / 31 / 2016

**Transaction ID : SA11.16162217**

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)..... ►

451.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. BROWN, ROBERT, C., MR., JR.

Mailing Address P.O. BOX 756

City  
OSCEOLAState  
WIZip Code  
54020-0756FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 01 / 2016

Transaction ID : SA11.16136217

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

B. BROWN, RONNY, , MR.,

Mailing Address 118 BIG JAKE CT.

City  
WEATHERFORDState  
TXZip Code  
76088-7219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACME ELECTRICOccupation (for Individual)  
ELECTRICAL CONTRACTOR

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  
03 / 31 / 2016

Transaction ID : SA11.16162185

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BROWN, STEVE, , ,

Mailing Address 30 SOUTH WACKER DRIVE

City  
CHICAGOState  
ILZip Code  
60606-7413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PROMUS EQUITY PARTNERSOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159649

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

600.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRUCKNER, DON, , MR.,**

Mailing Address 911 WAGON TRAIN SE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87123-4141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUEBERT BRUCKNER P.C.

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148627

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. BRUGGEMAN, RICHARD, , MR.,**

Mailing Address 1761 HARDIN LANE

City  
POWELL

State  
OH

Zip Code  
43065-9646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158262

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BRUNSON, BROOKS, , MR.,**

Mailing Address 138 QUINCY PLACE NE #4  
#4

City  
WASHINGTON

State  
DC

Zip Code  
20002-2429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BROWNSTEIN HYATT FARBER SCHRECK

Occupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

Transaction ID : SA11.16144167

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)..... ►

1350.00

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

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

FOR LINE NUMBER: PAGE 72 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BRYANT, ANTHONY, W., MR.,**

Mailing Address 108 N BARSTOW ST.

City  
WAUKESHA

State  
WI

Zip Code  
53186-4928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY FENCE CO.

Occupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151918**

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUCHANAN, DEE, , ,**

Mailing Address 2604 VALLEY DR.

City  
ALEXANDRIA

State  
VA

Zip Code  
22302-2843

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OGILVY GOVERNMENT RELATIONS

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147440**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUCHALSKI, RICHARD, , ,**

Mailing Address 219 SE 3RD TER

City  
POMPANO BEACH

State  
FL

Zip Code  
33060-7130

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  
03 / 14 / 2016

**Transaction ID : SA11.16145364**

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)..... ►

5600.00



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

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

FOR LINE NUMBER: PAGE 73 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BUCKERT, WALTER, J., MR., JR.**

Mailing Address 20898 ROYAL VILLA TERRACE

City  
POTOMAC FALLS

State  
VA

Zip Code  
20165-2499

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162039**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUCKLEY, MARLENE, , MRS.,**

Mailing Address 4100 OAK FOREST DR.

City  
DES MOINES

State  
IA

Zip Code  
50312-4633

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  
03 / 31 / 2016

**Transaction ID : SA11.16162658**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUERGER, MARY, M., MRS.,**

Mailing Address 115 STONY RIDGE CT.

City  
HILLSDALE

State  
MI

Zip Code  
49242-1154

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16153021**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 74 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BUERGER, MARY, M., MRS.,**

Mailing Address 115 STONY RIDGE CT.

City  
HILLSDALE

State  
MI

Zip Code  
49242-1154

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16153022**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUERGER, MARY, M., MRS.,**

Mailing Address 115 STONY RIDGE CT.

City  
HILLSDALE

State  
MI

Zip Code  
49242-1154

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158254**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUESCHER, ROBERT, H., MR.,**

Mailing Address 35 RED OAK PLACE

City  
MASSAPEQUA

State  
NY

Zip Code  
11758-7513

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148067**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 75 OF 923

(check only one)

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

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

**A. BUFFINGTON, GREGORY, D., MR.,**

Mailing Address 1787B GLENWOOD CIRCLE

City  
SUGAR GROVE

State  
IL

Zip Code  
60554-2017

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161797**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUNTING, DAVID, R., MR.,**

Mailing Address 114 MOUNTAIN VIEW DR.

City  
PACKWOOD

State  
WA

Zip Code  
98361-9706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HIGHWAY SHOPPER

Occupation (for Individual)  
NEWSPAPER PUBLISHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146531**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUNTING, DAVID, R., MR.,**

Mailing Address 114 MOUNTAIN VIEW DR.

City  
PACKWOOD

State  
WA

Zip Code  
98361-9706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HIGHWAY SHOPPER

Occupation (for Individual)  
NEWSPAPER PUBLISHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153642**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

260.00

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

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

FOR LINE NUMBER: PAGE 76 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BUNTING, DAVID, R., MR.,

Mailing Address 114 MOUNTAIN VIEW DR.

City  
PACKWOODState  
WAZip Code  
98361-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HIGHWAY SHOPPEROccupation (for Individual)  
NEWSPAPER PUBLISHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155736

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

B. BURDICK, THOMAS, J., REV.,

Mailing Address 31579 VINTNERS POINTE COURT

City  
WINCHESTERState  
CAZip Code  
92596-8318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLESSED TERESA OF CALCUTTAOccupation (for Individual)  
CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16138050

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BURDICK, THOMAS, J., REV.,

Mailing Address 31579 VINTNERS POINTE COURT

City  
WINCHESTERState  
CAZip Code  
92596-8318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLESSED TERESA OF CALCUTTAOccupation (for Individual)  
CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146282

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 77 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BURKER, HARRY, S., MR., JR.

Mailing Address 3000 GARLANDS LN UNIT 3312

City  
BARRINGTONState  
ILZip Code  
60010-6847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16151303

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

B. BURKE, JOHN, , ,

Mailing Address 622,, N WATER ST  
801City  
MILWAUKEEState  
WIZip Code  
53202-4909FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
REAL ESTATE DEV.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158478

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. BURLESON, DAVID, T., MR.,

Mailing Address 9002 RANCICH

City  
EL PASOState  
TXZip Code  
79904-1029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149626

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 78 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BURNS, RICHARD, , ,

Mailing Address 6227 E VILLA CASSANDRA WAY

City  
CAVE CREEKState  
AZZip Code  
85331-9148FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16154976

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. BURRISS, JOHN, A., MR., JR.

Mailing Address 415 161ST PL SE

City  
BELLEVUEState  
WAZip Code  
98008-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149587

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. BURWELL, CAROLYN, R., MS.,

Mailing Address 2410 SOUTH ELEVENTH STREET

City  
IRONTONState  
OHZip Code  
45638-2667FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143953

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

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

1110.00

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

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

FOR LINE NUMBER: PAGE 79 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. BURWELL, CAROLYN, R., MS.,

Mailing Address 2410 SOUTH ELEVENTH STREET

City  
IRONTONState  
OHZip Code  
45638-2667FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143954

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

B. BURWELL, CAROLYN, R., MS.,

Mailing Address 2410 SOUTH ELEVENTH STREET

City  
IRONTONState  
OHZip Code  
45638-2667FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143955

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

C. BUTLER, EDWIN D., MR.,

Mailing Address PO BOX 1874

City  
BUENA VISTAState  
COZip Code  
81211-1874FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BUTLER PLUMBING &amp; SEWER

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149065

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

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

280.00

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

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

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

FOR LINE NUMBER: PAGE 80 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. BUTLER, GREENE, S., MR.,**

Mailing Address 929 N. MAIN STREET

City  
HOMER

State  
LA

Zip Code  
71040-3845

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 ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147661

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**B. BUTT, CHARLES, , ,**

Mailing Address 9461 OAK DR.

City

SPRINGDALE

State

AR

Zip Code

72762-2511

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142271

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**C. BUTT, CHARLES, , ,**

Mailing Address 9461 OAK DR.

City

SPRINGDALE

State

AR

Zip Code

72762-2511

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160907

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

2250.00



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

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

FOR LINE NUMBER: PAGE 81 OF 923

(check only one)

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

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

**A. BUTTS, JAMES, , ,**

Mailing Address 2590 CASCO POINT ROAD

City  
WAYZATA

State  
MN

Zip Code  
55391-9721

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151899**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. CABANAS, JOSEPH, E., ,**

Mailing Address 10520 NW 26TH STREET  
STE. C-201

City  
DORAL

State  
FL

Zip Code  
33172-2161

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  
03 / 29 / 2016

**Transaction ID : SA11.16158577**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. CAFRITZ, JAMES, E., MR.,**

Mailing Address 4710 BETHESDA AVE  
APT 508

City  
BETHESDA

State  
MD

Zip Code  
20814-5256

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146095**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 82 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CALDWELL, DAVID, , ,**

Mailing Address 2955 HARRISON ST.  
SUITE 103

City  
BEAUMONT

State  
TX

Zip Code  
77702-1155

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DAVID M CALDWELL, DDS

Occupation (for Individual)  
DENTIST

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  
03 / 27 / 2016

**Transaction ID : SA11.16154972**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CALDWELL, DAVID, , ,**

Mailing Address 2955 HARRISON ST.  
SUITE 103

City  
BEAUMONT

State  
TX

Zip Code  
77702-1155

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DAVID M CALDWELL, DDS

Occupation (for Individual)  
DENTIST

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  
03 / 27 / 2016

**Transaction ID : SA11.16154973**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. CALHOON, RICKY, J., MR.,**

Mailing Address 217 WEST CAPITOL STREET

City  
JACKSON

State  
MS

Zip Code  
39201-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRUET COMPANY

Occupation (for Individual)  
GENERAL PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159699**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 83 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. CALLEN, MICHAEL, , MR.,

Mailing Address 3690 OAK WOOD DRIVE

City  
PARK CITYState  
UTZip Code  
84060-7808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159561

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. CANBY, THOMAS, D., MR.,

Mailing Address 311 BLUEBIRD XING

City  
GLEN MILLSState  
PAZip Code  
19342-3361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149887

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

C. CARD, ORSON, SCOTT, ,

Mailing Address 401 WILLOUGHBY BLVD.

City  
GREENSBOROState  
NCZip Code  
27408-3135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HATRACK RIVER ENTERPRISESOccupation (for Individual)  
WRITER, PUBLISHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

Transaction ID : SA11.16144742

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 84 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CARLSON, JON, D., MR.,**

Mailing Address P.O. BOX 457

City  
ST JOSEPH

State  
MI

Zip Code  
49085-0457

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154831**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. CAROLE, BERLEY, , ,**

Mailing Address 130 KIRK LANE

City  
MEDIA

State  
PA

Zip Code  
19063-2111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OWNER

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158779**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CARPENTER, PETER, , ,**

Mailing Address 1301 DOVE ST  
200

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660-2412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANT INSURANCE

Occupation (for Individual)  
COO

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  
03 / 29 / 2016

**Transaction ID : SA11.16158697**

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)..... ►

1750.00

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

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

FOR LINE NUMBER: PAGE 85 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CARR, WILLIAM, D., ,**

Mailing Address 10222 SW 228TH STREET

City  
VASHON

State  
WA

Zip Code  
98070-7089

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PSYCHOTHERAPIST & FARMER

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  
03 / 30 / 2016

**Transaction ID : SA11.16160267**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CARTER, DAVID, L., MR.,**

Mailing Address 3610 E 3850 N

City  
KIMBERLY

State  
ID

Zip Code  
83341-5036

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150728**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. CARTER, FRANCIS, C., ,**

Mailing Address 359 VEST TANNERY RD NE

City  
CHECK

State  
VA

Zip Code  
24072-3266

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146064**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 86 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CARTER, FRANCIS, C., ,**

Mailing Address 359 VEST TANNERY RD NE

City  
CHECK

State  
VA

Zip Code  
24072-3266

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149261**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. CASS, ROBERT, L., MR., SR.**

Mailing Address 2781 OXFORD LANE

City

MOUNT DORA

State

FL

Zip Code

32757-2857

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147343**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. CASSEDAY, ERNEST, D., MR.,**

Mailing Address 13207 WOODRIDGE LN SW

City

CUMBERLAND

State

MD

Zip Code

21502-5965

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143683**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1535.00

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

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

FOR LINE NUMBER: PAGE 87 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CAUGHEY, JANE, S., ,**

Mailing Address 842 E VILLA ST 317  
APT 317

City  
PASADENA

State  
CA

Zip Code  
91101-1284

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEASY PENNER & PARTNERS

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145257**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CENTENARI, PAUL, , ,**

Mailing Address 8140 TELEGRAPH RD

City

SEVERN

State

MD

Zip Code

21144-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLAS

Occupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154857**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. CEPEK, GRETCHEN, , MS.,**

Mailing Address 5204 W. 60TH STREET

City

EDINA

State

MN

Zip Code

55436-2650

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANZ LIFE INSURANCE

Occupation (for Individual)  
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169747**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 88 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CHAMBERS, BRUCE, A., MR.,**

Mailing Address 10040 SCHUSS DR.

City  
ANCHORAGE

State  
AK

Zip Code  
99507-5936

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16148984**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHAPPELL, MICHAEL, F., MR.,**

Mailing Address 2818 UNIVERSITY TER NW

City  
WASHINGTON

State  
DC

Zip Code  
20016-3459

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIERCE GOVERNMENT RELATIONS

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141826**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. CHATTERJEE, NIRMAL, , DR.,**

Mailing Address 2324 WILLOW DROP WAY

City  
OVIEDO

State  
FL

Zip Code  
32766-7082

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AIR PRODUCTS & CHEMICALS

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148251**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

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

15250.00



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

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

FOR LINE NUMBER: PAGE 89 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CHERIPKA, KEVIN, J., MR.,**

Mailing Address 9611 ESPIRIT CT SE

City  
OLYMPIA

State  
WA

Zip Code  
98513-6680

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161239**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHIAPETTA, DOMINIC, , MR.,**

Mailing Address 1317 WILDFIELD LN

City

FREMONT

State

MI

Zip Code

49412-9039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142111**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. CHOKSI, ARMEANE, , ,**

Mailing Address 2340 KALORAMA ROAD NW

City

WASHINGTON

State

DC

Zip Code

20008-1623

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142863**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1450.00

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

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

FOR LINE NUMBER: PAGE 90 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CHOUEST, GARY, , MR.,**

Mailing Address P.O. BOX 310

City  
GALLIANO

State  
LA

Zip Code  
70354-0310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDISON CHOUEST OFFSHORE

Occupation (for Individual)  
SHIP OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16149096**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

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

**B. CLANCY, MARK, , MR.,**

Mailing Address 915 S HIMES AVE

City  
TAMPA

State  
FL

Zip Code  
33629-5107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DTCC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161781**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. CLAPTON, CHARLES, , ,**

Mailing Address 7113 RICHARD CASEY COURT

City  
ALEXANDRIA

State  
VA

Zip Code  
22307-1673

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155665**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

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

36150.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 91 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. CLARK, ALBERT, , MR.,

Mailing Address 711 S. MONTGOMERY ST.

City  
STARKVILLE

State  
MS

Zip Code  
39759-3805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
C.C.CLARK, INC.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16151750

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

B. CLARKE, DAVID, , ,

Mailing Address 32 SILVER FOX CIRCLE

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80121-2129

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

Transaction ID : SA11.16144006

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. CLARKE, GERALD, D., MR.,

Mailing Address 119 SHERWOOD DR.

City  
WILLIAMSBURG

State  
VA

Zip Code  
23185-5025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENERGY SERVICES GROUP

Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154521

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1350.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. CLARK, KIRK, , MR.,

Mailing Address P.O. BOX 938

City  
MCALLEN

State  
TX

Zip Code  
78505-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
AUTOMOBILE DEALER

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  
03 / 30 / 2016

Transaction ID : SA11.16160488

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

B. CLARK, RICK, , MR.,

Mailing Address 11908 2ND ST

City  
YUCAIPA

State  
CA

Zip Code  
92399-2838

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139084

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

C. CLARK, RICK, , MR.,

Mailing Address 11908 2ND ST

City  
YUCAIPA

State  
CA

Zip Code  
92399-2838

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155688

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

325.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CLARK, RICHARD, A., ,**

Mailing Address 6242 W STATE RD. 28

City  
WEST LEBANON

State  
IN

Zip Code  
47991-8054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142090**

Amount of Each Receipt this Period

375.00

☐ Memo Item  
CONTRIBUTION

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

**B. CLEMENTS, EVAN, E., MR.,**

Mailing Address 4352 TRADEWINDS. DR.

City  
OXNARD

State  
CA

Zip Code  
93035-1404

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139405**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

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

**C. CLEVELAND, RANDY, , ,**

Mailing Address 400 RIDGEWOOD ROAD

City  
FORT WORTH

State  
TX

Zip Code  
76107-1058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

EXXON MOBIL

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155666**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

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

2976.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. COCHIE, KEVIN, S., MR.,

Mailing Address 500 M STREET NW  
 APARTMENT 2

City  
 WASHINGTON

State  
 DC

Zip Code  
 20001-3688

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 NAMMO INC.

Occupation (for Individual)  
 VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

Transaction ID : SA11.16141857

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

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

B. COHEE, GEORGE, F., MR.,

Mailing Address 53 12TH AVE

City  
 MILTON

State  
 WA

Zip Code  
 98354-6500

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  
 03 / 07 / 2016

Transaction ID : SA11.16138835

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

C. COHEE, GEORGE, F., MR.,

Mailing Address 53 12TH AVE

City  
 MILTON

State  
 WA

Zip Code  
 98354-6500

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  
 03 / 24 / 2016

Transaction ID : SA11.16153544

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

1100.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. COLE, ELLIE, , ,**

Mailing Address 4520 E. SWANS NEST TD

City  
TUCSON

State  
AZ

Zip Code  
85718-6246

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162641**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. COLLIER, HOWARD, , MR.,**

Mailing Address 581 JOLLY ROGERS RD

City  
ABILENE

State  
TX

Zip Code  
79601-2709

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139324**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. COLLIER, PATRICIA, J., ,**

Mailing Address 3201 PINE RD NE  
303

City  
BREMERTON

State  
WA

Zip Code  
98310-2168

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16143003**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

625.00

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. COLLIER, PATRICIA, J., ,**

Mailing Address 3201 PINE RD NE  
303

City  
BREMERTON

State  
WA

Zip Code  
98310-2168

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154865**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. COLTON, WILLIAM, , MR.,**

Mailing Address 6334 WESTCHESTER DRIVE

City  
DALLAS

State  
TX

Zip Code  
75205-1669

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBIL

Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143487**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. COLUCCI, ANTHONY, , ,**

Mailing Address 701 SENECA ST

City  
BUFFALO

State  
NY

Zip Code  
14210-1351

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142246**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

1325.00



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

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

A. COLUCCI, ANTHONY, J., MR., JR.

Mailing Address 154 RUMSEY RD

City  
BUFFALO

State  
NY

Zip Code  
14209-1041

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLUCCI & GALLAHER P.C.

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16164065

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

B. CONANT, ROGER, P., MR.,

Mailing Address 4 FISHING EAGLE CT

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-4948

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 / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16144620

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. CONANT, ROGER, P., MR.,

Mailing Address 4 FISHING EAGLE CT

City  
FERNANDINA BEACH

State  
FL

Zip Code  
32034-4948

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 / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150873

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

350.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CONDIE, HERBERT, , ,**

Mailing Address 545 CPCPNIT PALM ROAD

City  
VERO BEACH

State  
FL

Zip Code  
32963-

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  
03 / 10 / 2016

**Transaction ID : SA11.16143305**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CONWAY, WILLIAM, E., ,**

Mailing Address 32400 FAIRMOUNT BL.

City  
PEPPER PIKE

State  
OH

Zip Code  
44124-4830

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158864**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. CORDERO, ALFONSO, G., MR.,**

Mailing Address P.O. BOX 6240

City  
STATELINE

State  
NV

Zip Code  
89449-6240

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149164**

Amount of Each Receipt this Period

251.00

☐ Memo Item  
CONTRIBUTION

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

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

1501.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. COSTA, GALE, , ,**

Mailing Address 6008 LAKE MANOR DRIVE

City  
BALTIMORE

State  
MD

Zip Code  
21210-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHAPIN DAVIS

Occupation (for Individual)

PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160503**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. COSTA, GALE, , ,**

Mailing Address 6008 LAKE MANOR DRIVE

City  
BALTIMORE

State  
MD

Zip Code  
21210-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHAPIN DAVIS

Occupation (for Individual)

PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161816**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

**C. COURI, JUDITH, M., MS.,**

Mailing Address 1215 SEITZ DR.

City  
WAUKESHA

State  
WI

Zip Code  
53186-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

COURI INSURANCE

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143956**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

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

215.00

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

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

FOR LINE NUMBER: PAGE 100 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. COURI, JUDITH, M., MS.,

Mailing Address 1215 SEITZ DR.

City  
WAUKESHA

State  
WI

Zip Code  
53186-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COURI INSURANCE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146827

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

B. COURI, JUDITH, M., MS.,

Mailing Address 1215 SEITZ DR.

City  
WAUKESHA

State  
WI

Zip Code  
53186-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COURI INSURANCE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158314

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. CRAIG, KEVIN, J., MR.,

Mailing Address 34 CHESTNUT DRIVE

City  
HUNTINGTON

State  
WV

Zip Code  
25705-3520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL RESOURCE PARTNERS

Occupation (for Individual)  
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16149112

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

1275.00

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

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

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

FOR LINE NUMBER: PAGE 101 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CRAIN, SUSAN, R., ,**

Mailing Address 7182 CHAMPIONS LN

City  
WEST CHESTER

State  
OH

Zip Code  
45069-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151799**

Amount of Each Receipt this Period

210.00

☐ Memo Item  
CONTRIBUTION

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

**B. CRAY, SANDY, , ,**

Mailing Address 6267 S. MILLER CT.

City  
LITTLETON

State  
CO

Zip Code  
80127-5584

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160316**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. CROOK, HERBERT, , MR.,**

Mailing Address P.O. BOX 601

City  
DALLESPORT

State  
WA

Zip Code  
98617-0601

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  
03 / 29 / 2016

**Transaction ID : SA11.16158532**

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)..... ►

495.00

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

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

FOR LINE NUMBER: PAGE 102 OF 923

(check only one)

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

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

**A. CROSBY, JOHN, F., MRS.,**

Mailing Address 1025 SPYGLASS LN

City  
NAPLES

State  
FL

Zip Code  
34102-7734

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16164062**

Amount of Each Receipt this Period

240.00

☐ Memo Item  
CONTRIBUTION

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

**B. CROW, PETE, , ,**

Mailing Address 1451 W. DRY CREEK RD

City  
LITTLETON

State  
CO

Zip Code  
80120-3271

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PUBLISHER

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  
03 / 31 / 2016

**Transaction ID : SA11.16162121**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. CROWTHER, MARY, , MS.,**

Mailing Address 8431 BRIAR LANE

City  
PRAIRIE VILLAGE

State  
KS

Zip Code  
66207-1746

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162554**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 103 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CRYDER, CLARICE, , ,**

Mailing Address 4363 PINE COVE ROAD

City  
BILLINGS

State  
MT

Zip Code  
59106-1336

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148582**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CRYDER, CLARICE, , ,**

Mailing Address 4363 PINE COVE ROAD

City  
BILLINGS

State  
MT

Zip Code  
59106-1336

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158968**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**C. CRYDER, CLARICE, , ,**

Mailing Address 4363 PINE COVE ROAD

City  
BILLINGS

State  
MT

Zip Code  
59106-1336

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158969**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 104 OF 923

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. CULLEN, MARK, , MR.,

Mailing Address 220 JEFFERSON

City  
JANESVILLE

State  
WI

Zip Code  
53545-4131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JP CULLEN AND SONS

Occupation (for Individual)

CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158561

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

B. CUNNINGHAM, RALPH, S., ,

Mailing Address 5128 TANGLE LANE

City  
HOUSTON

State  
TX

Zip Code  
77056-2116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ENTERPRISE PRODUCTS COMPANY

Occupation (for Individual)

MANAGER

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  
03 / 31 / 2016

Transaction ID : SA11.16161646

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. CUNNINGHAM, WILLIAM, , ,

Mailing Address P.O. BOX 1304

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-1304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

POLARIS CONSULTING, LLC

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161735

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

2250.00

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



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CURRIE, RODGER, , ,**

Mailing Address PHRMA, 950 F ST, NW, SUITE 300

City  
WASHINGTON

State  
DC

Zip Code  
20004-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147442

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. CURRY, HAROLD, , ,**

Mailing Address 6911 W 101ST ST

City  
SHAWNEE MISSION

State  
KS

Zip Code  
66212-1640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16149256

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. CURTIS, DEBORAH, L., MRS.,**

Mailing Address 2380 W MONTE VISTA AVE.

City  
TURLOCK

State  
CA

Zip Code  
95382-9668

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE

Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16152491

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

5525.00

# **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)

PAGE 106 OF 923

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. CUSHMAN, CURTIS, , ,**

Mailing Address 2832 VISTA BUTTE DR.

City  
LAS VEGAS

State  
NV

Zip Code  
89134-7648

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145750**

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

**B. CUSHMAN, CURTIS, , ,**

Mailing Address 2832 VISTA BUTTE DR.

City  
LAS VEGAS

State  
NV

Zip Code  
89134-7648

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156742**

Amount of Each Receipt this Period

210.00

☐ Memo Item  
CONTRIBUTION

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

**C. DABBS, ROBERT, , MR.,**

Mailing Address 1109 C STREET

City  
BELMAR

State  
NJ

Zip Code  
07719-2457

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159244**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

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

425.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 923  
(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)

**NRCC**

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

**A. DAHL, LAURIN, K., MR.,**

Mailing Address 5 BIG OAKS RD

City  
STREAMWOODState  
ILZip Code  
60107-1317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

**Transaction ID : SA11.16138039**

Amount of Each Receipt this Period

70.00

☐ Memo Item  
 CONTRIBUTION

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

**B. DAHL, LAURIN, K., MR.,**

Mailing Address 5 BIG OAKS RD

City  
STREAMWOODState  
ILZip Code  
60107-1317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2016

**Transaction ID : SA11.16151562**

Amount of Each Receipt this Period

68.30

☐ Memo Item  
 CONTRIBUTION

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

**C. DAILY, FRANCIS, R., , JR.**

Mailing Address 835 COUNTRY LANE

City  
HOUSTONState  
TXZip Code  
77024-3106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
BUSINESS CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

**Transaction ID : SA11.16146655**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

638.30

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DALSIN, THOMAS, , ,**

Mailing Address 16033 NORHTWOOD RD NW

City  
PRIOR LAKE

State  
MN

Zip Code  
55372-1611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
EBSO, INC

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**03 / 24 / 2016**

**Transaction ID : SA11.16153305**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. DALSIN, THOMAS, , ,**

Mailing Address 16033 NORHTWOOD RD NW

City  
PRIOR LAKE

State  
MN

Zip Code  
55372-1611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
EBSO, INC

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16158322**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

**C. DALY, JUSTIN, , ,**

Mailing Address P.O. BOX 1301

City  
GREAT FALLS

State  
VA

Zip Code  
22066-8301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DALY CONSULTING GROUP

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

**03 / 14 / 2016**

**Transaction ID : SA11.16144858**

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

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

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

1460.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<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)

**NRCC**

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

**A. DARUTY, JOSEPH, C., MR.,**

Mailing Address 401 VISTA PARADA

City  
NEWPORT BEACHState  
CAZip Code  
92660-3528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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
03	14	2016

**Transaction ID : SA11.16145983**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. DAUSKA, WALTER, , MR.,**

Mailing Address 378 SHADY DR.

City  
HOBARTState  
WIZip Code  
54155-9241FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16142280**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. DAVIDSON, ELIZABETH, M., MRS.,**

Mailing Address 100 SADDLEBACK RD

City  
ROLLING HILLSState  
CAZip Code  
90274-5143FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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
03	21	2016

**Transaction ID : SA11.16151086**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DAVIDSMEYER, J., WILLIAM, ,**

Mailing Address 7 SAINT ANDREWS DR.

City  
JACKSONVILLE

State  
IL

Zip Code  
62650-3384

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146165**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. DAVIDSON, KAREN, , MRS.,**

Mailing Address 4475 LAHSEE ROAD

City  
BLOOMFIELD HILLS

State  
MI

Zip Code  
48304-2618

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155661**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. DAVIS, RONALD, ALLEN, ,**

Mailing Address 2533 DEMINK ST.

City  
MILFORD

State  
MI

Zip Code  
48380-3947

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  
03 / 24 / 2016

**Transaction ID : SA11.16153165**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

1125.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DAVIS, RONALD, ALLEN, ,**

Mailing Address 2533 DEMINK ST.

City  
MILFORD

State  
MI

Zip Code  
48380-3947

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  
03 / 29 / 2016

**Transaction ID : SA11.16158576**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. DAVIS, RUTH, J., ,**

Mailing Address 316 OSPREY CIR.

City  
SAINT MARYS

State  
GA

Zip Code  
31558-4144

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155523**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

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

**C. DE PAOLO, HELEN, MARIE, MRS.,**

Mailing Address 725 EVERGLADE DR.

City  
MELBOURNE

State  
FL

Zip Code  
32935-6928

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146002**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

350.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DE PAOLO, HELEN, MARIE, MRS.,**

Mailing Address 725 EVERGLADE DR.

City  
MELBOURNE

State  
FL

Zip Code  
32935-6928

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149842**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. DE VOGEL, WILLEM, , MR.,**

Mailing Address 115 CHARLIE HILL ROAD

City  
MILLERTON

State  
NY

Zip Code  
12546-4454

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  
03 / 30 / 2016

**Transaction ID : SA11.16160755**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. DE VOGEL, WILLEM, , MR.,**

Mailing Address 115 CHARLIE HILL ROAD

City  
MILLERTON

State  
NY

Zip Code  
12546-4454

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  
03 / 31 / 2016

**Transaction ID : SA11.16162171**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

250.00



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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DECHELLIS, ROBERT, , MR.,**

Mailing Address 19090 MINNETONKA BLVD.

City  
DEEPHAVEN

State  
MN

Zip Code  
55391-3522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANZ LIFE INSURANCE

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169761**

Amount of Each Receipt this Period

333.00

☐ Memo Item  
CONTRIBUTION

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

**B. DECLEVA, PAUL, , ,**

Mailing Address 500 N AKARD ST  
STE 3540

City  
DALLAS

State  
TX

Zip Code  
75201-6669

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORDA MANAGEMENT

Occupation (for Individual)  
OIL DRILLING CONSULTANT

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  
03 / 14 / 2016

**Transaction ID : SA11.16145155**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. DEER, CHARLES, R., MR.,**

Mailing Address 322 FAIRBANKS ST

City  
FAIRBANKS

State  
AK

Zip Code  
99709-3447

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  
03 / 10 / 2016

**Transaction ID : SA11.16143119**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

633.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DEER, CHARLES, R., MR.,**

Mailing Address 322 FAIRBANKS ST

City  
FAIRBANKS

State  
AK

Zip Code  
99709-3447

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  
03 / 18 / 2016

**Transaction ID : SA11.16148730**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEICHMANN, BERNHARD, E., MR.,**

Mailing Address 1979 SHADY LANE

City  
MT. BETHEL

State  
PA

Zip Code  
18343-5964

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 ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160681**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DEKREY, WARREN, W., MR.,**

Mailing Address 730 ASPEN PLACE

City  
BISMARCK

State  
ND

Zip Code  
58503-0191

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137382**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

350.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DEL RASO, JOSEPH, V., MR.,**

Mailing Address 3000 TWO LOGAN SQUARE

City  
PHILADELPHIA

State  
PA

Zip Code  
19103-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PEPPER HAMILTON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169754**

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

**B. DELGADO, DIXIE, , ,**

Mailing Address 13132 TORRESINA TER

City  
BRADENTON

State  
FL

Zip Code  
34211-8420

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16136989**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DELONG, MAX, M., MR.,**

Mailing Address 60 MISSISSIPPI RIVER BLVD N

City  
SAINT PAUL

State  
MN

Zip Code  
55104-5613

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 / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153668**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

25300.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DEMARTINI, FELIX, E., DR.,**

Mailing Address 975 SAINT ANNES LANE

City  
VERO BEACH

State  
FL

Zip Code  
32967-7350

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151929**

Amount of Each Receipt this Period

130.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEMARCUS, JAY, , ,**

Mailing Address P.O. BOX 340020

City  
NASHVILLE

State  
TN

Zip Code  
37203-0020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RASCAL FLATTS INC.

Occupation (for Individual)  
ENTERTAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162524**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. DEMARCUS, JAY, , ,**

Mailing Address P.O. BOX 340020

City  
NASHVILLE

State  
TN

Zip Code  
37203-0020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RASCAL FLATTS INC.

Occupation (for Individual)  
ENTERTAINER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162527**

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)..... ►

630.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 117 OF 923  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DEMERE, MARY, BULLOCK, ,**

Mailing Address 3350 TURNERS ROCK RD

City  
SAVANNAH

State  
GA

Zip Code  
31410-3630

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145321**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEMERE, MARY, BULLOCK, MRS.,**

Mailing Address 3350 TURNERS ROCK RD

City  
SAVANNAH

State  
GA

Zip Code  
31410-3630

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146191**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. DENNIS, WILEY, S., ,**

Mailing Address P.O. BOX 579

City  
GAUTIER

State  
MS

Zip Code  
39553-0579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SINGING RIVER HEALTH SYST MS

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138434**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 118 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DEROSI, DONALD, , MR.,**

Mailing Address P.O. BOX 1324

City  
VINELAND

State  
NJ

Zip Code  
08362-1324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEROSI & SO COMPANY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155638**

Amount of Each Receipt this Period

8000.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEROUSSE, DAVID, , MR.,**

Mailing Address 1004 MOHAWK ST.

City  
CLEARWATER

State  
FL

Zip Code  
33755-1832

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 ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154647**

Amount of Each Receipt this Period

247.00

☐ Memo Item  
CONTRIBUTION

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

**C. DEVANEY, CHARLES, W., MR.,**

Mailing Address 2909 ROSEFIELD DR.

City  
HOUSTON

State  
TX

Zip Code  
77080-2607

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149989**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

8347.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DICKES, TOM, , MR.,**

Mailing Address 96 AVENUE C APT 1

City  
MARATHON

State  
FL

Zip Code  
33050-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

BOARD MEMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155628**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. DICKMEYER, STEVE, , ,**

Mailing Address 1930 CASCADES CT

City  
OXNARD

State  
CA

Zip Code  
93036-2776

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 / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146170**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DICKMEYER, STEVE, , ,**

Mailing Address 1930 CASCADES CT

City  
OXNARD

State  
CA

Zip Code  
93036-2776

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 / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161743**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

400.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

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

**A. DICKSON, REGINALD, , ,**

Mailing Address 118 CARRIAGE HILL DRIVE

City  
BATTLE CREEK

State  
MI

Zip Code  
49017-3174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16140968**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. DILL, JOYCE, , MS.,**

Mailing Address 3725 WEST CENTER ST

City  
CINCINNATI

State  
OH

Zip Code  
45227-4446

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16149013**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**C. DILLINGHAM, DAN, , ,**

Mailing Address 3706 COMPOUND

City  
ENID

State  
OK

Zip Code  
73703-3769

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 / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136595**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DILLINGHAM, DAN, , ,**

Mailing Address 3706 COMPOUND

City  
ENID

State  
OK

Zip Code  
73703-3769

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

**03 / 21 / 2016**

**Transaction ID : SA11.16149742**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DINGLEY, DAVID, W., MR.,**

Mailing Address 3308 W. 68TH ST.

City

MISSION HILLS

State

KS

Zip Code

66208-2137

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**03 / 16 / 2016**

**Transaction ID : SA11.16147445**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DODGE, MARY, M., MS.,**

Mailing Address 262 BAREFOOT BEACH BLVD #201  
201

City

BONITA SPRINGS

State

FL

Zip Code

34134-2519

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**03 / 24 / 2016**

**Transaction ID : SA11.16153430**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DODGE, MARY, M., MS.,**

Mailing Address 262 BAREFOOT BEACH BLVD #201  
201

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-2519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153431**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODGE, MARY, M., MS.,**

Mailing Address 262 BAREFOOT BEACH BLVD #201  
201

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-2519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159653**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOHMEN, ERWIN, J., MR.,**

Mailing Address 5110 COUNTRY CLUB BEACH RD.

City  
PORT WASHINGTON

State  
WI

Zip Code  
53074-9642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159643**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOLAN, MICHAEL, J., MR.,**

Mailing Address 6215 STEFANI DRIVE

City  
DALLAS

State  
TX

Zip Code  
75225-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBIL CHEMICAL CO.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151454**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DONAHUE, RHODORA, J., MRS.,**

Mailing Address 1001 LIBERTY AVENUE  
SUITE 850

City

PITTSBURGH

State

PA

Zip Code

15222-3718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151458**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONOVAN, JEFFREY, , ,**

Mailing Address 1917 HARBOUR CIR.

City

CAPE CORAL

State

FL

Zip Code

33914-2521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEFFREY DONOVAN

Occupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158822**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOSS, B., J., MRS.,**

Mailing Address P.O. BOX 1575

City  
COTTONWOOD

State  
CA

Zip Code  
96022-1575

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138674**

Amount of Each Receipt this Period

135.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOTSON, GERALD, L., ,**

Mailing Address 757 HORIZON HILL RD  
P.O. BOX 306

City  
YACHATS

State  
OR

Zip Code  
97498-0306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141354**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOTSON, GERALD, L., ,**

Mailing Address 757 HORIZON HILL RD  
P.O. BOX 306

City  
YACHATS

State  
OR

Zip Code  
97498-0306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143611**

Amount of Each Receipt this Period

88.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

258.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOTSON, GERALD, L., ,**

Mailing Address 757 HORIZON HILL RD  
P.O. BOX 306

City  
YACHATS

State  
OR

Zip Code  
97498-0306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155492**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOUGLAS, DAVID, B., MR.,**

Mailing Address 3907 TRAPPERS FOREST DR.

City

HOUSTON

State

TX

Zip Code

77088-7443

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16148877**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOYLE, WILFRED, S., MR., JR.**

Mailing Address 1218 N 20TH AVE

City

YAKIMA

State

WA

Zip Code

98902-1209

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16164055**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

635.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DREHER, MITZI, I., ,**

Mailing Address 22130 PROSPECT HL

City  
SAN ANTONIO

State  
TX

Zip Code  
78258-2581

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146442**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DREHER, MITZI, I., ,**

Mailing Address 22130 PROSPECT HL

City  
SAN ANTONIO

State  
TX

Zip Code  
78258-2581

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157024**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DREW, GEORGE, S., DR.,**

Mailing Address 243 BERRIE RD.

City  
AIKEN

State  
SC

Zip Code  
29801-4803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLASTIC & RECONSTRUCTIVE SURG. CTR.

Occupation (for Individual)  
MD.

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  
03 / 10 / 2016

**Transaction ID : SA11.16143295**

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)..... ►

451.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DREYFUS, MARK, , MR.,

Mailing Address 5104 OCEANFRONT AVE

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23451-2339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ECPI UNIVERSITY

Occupation (for Individual)  
EDUCATION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16151453

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DRINKWATER, GENEVA, A., MS.,

Mailing Address P.O. BOX 495

City  
COTTONWOOD

State  
CA

Zip Code  
96022-0495

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139056

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DRINKWATER, GENEVA, A., MS.,

Mailing Address P.O. BOX 495

City  
COTTONWOOD

State  
CA

Zip Code  
96022-0495

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154524

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5020.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRINKWATER, GENEVA, A., MS.,**

Mailing Address P.O. BOX 495

City  
COTTONWOOD

State  
CA

Zip Code  
96022-0495

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154957**

Amount of Each Receipt this Period

3.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRINKWATER, GENEVA, A., MS.,**

Mailing Address P.O. BOX 495

City  
COTTONWOOD

State  
CA

Zip Code  
96022-0495

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159670**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DRINKARD, VAUGHAN, , MR.,**

Mailing Address 1070 GOVERNMENT STREE

City  
MOBILE

State  
AL

Zip Code  
36604-2442

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149352**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

153.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUBAK, VLASTIMIR, , MR.,**

Mailing Address 417 S BLUFF AVE  
400

City  
LA GRANGE

State  
IL

Zip Code  
60525-6866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUBAK ELECTRICAL MTCE CORP

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149390**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUGGAN, TIMOTHY, , MR.,**

Mailing Address 40 WINDING WAY

City  
SHORT HILLS

State  
NJ

Zip Code  
07078-2530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITIGROUP

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159184**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUKE, GEORGE, B., MR.,**

Mailing Address 580 E MAIN STREET

City  
BRADFORD

State  
PA

Zip Code  
16701-1838

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ZIPPO MFG. COMPANY

Occupation (for Individual)  
CHAIRMAN & OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169750**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNATHAN, JAMES, R., MR.,**

Mailing Address 18745 HUMMINGBIRD DR.

City  
PENN VALLEY

State  
CA

Zip Code  
95946-9692

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156696**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNATHAN, JAMES, R., MR.,**

Mailing Address 18745 HUMMINGBIRD DR.

City  
PENN VALLEY

State  
CA

Zip Code  
95946-9692

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156884**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCKEL, VERNON, , ,**

Mailing Address 2678 HALSEY TERRACE

City  
THE VILLAGES

State  
FL

Zip Code  
32162-4423

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  
03 / 30 / 2016

**Transaction ID : SA11.16160589**

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)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCKEL, VERNON, , ,**

Mailing Address 2678 HALSEY TERRACE

City  
THE VILLAGES

State  
FL

Zip Code  
32162-4423

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  
03 / 30 / 2016

**Transaction ID : SA11.16160590**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNN, LOUISE, KENDALL, ,**

Mailing Address 1559 MEADOW CIRCLE

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1760

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  
03 / 24 / 2016

**Transaction ID : SA11.16153227**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNN, LOUISE, KENDALL, ,**

Mailing Address 1559 MEADOW CIRCLE

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1760

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  
03 / 24 / 2016

**Transaction ID : SA11.16153228**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNN, LOUISE, KENDALL, ,**

Mailing Address 1559 MEADOW CIRCLE

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1760

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  
03 / 25 / 2016

**Transaction ID : SA11.16154572**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNN, LOUISE, KENDALL, ,**

Mailing Address 1559 MEADOW CIRCLE

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1760

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  
03 / 29 / 2016

**Transaction ID : SA11.16159347**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNN, LOUISE, KENDALL, ,**

Mailing Address 1559 MEADOW CIRCLE

City  
CARPINTERIA

State  
CA

Zip Code  
93013-1760

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  
03 / 29 / 2016

**Transaction ID : SA11.16159348**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EASTERBROOK, FRANK, , ,**

Mailing Address 117 G STREET

City  
NEWPORT BEACH

State  
CA

Zip Code  
92661-1418

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BALBOA BRANDS

Occupation (for Individual)  
MANAGER

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  
03 / 31 / 2016

**Transaction ID : SA11.16162735**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EBY, JOHN, , ,**

Mailing Address 1290 PAT COLWELL RD

City  
BLAIRSVILLE

State  
GA

Zip Code  
30512-9303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140847**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDNER, PATRICIA, A., MS.,**

Mailing Address 597 SE BEAVER CREEK LANE

City  
TROUTDALE

State  
OR

Zip Code  
97060-3216

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153776**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EDNER, PATRICIA, A., MS.,**

Mailing Address 597 SE BEAVER CREEK LANE

City  
TROUTDALE

State  
OR

Zip Code  
97060-3216

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162356**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EDWARDS, MARK, S., MR.,**

Mailing Address 5551 TAFT AVE

City  
LA JOLLA

State  
CA

Zip Code  
92037-7643

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152861**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EDWARDS, ROBERT, H., ,**

Mailing Address P.O. BOX 310

City  
WALHALLA

State  
SC

Zip Code  
29691-0310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146229**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 135 OF 923

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EGO, DONNA, C., MRS.,**

Mailing Address 1279 MOUNTAIN FIR CT  
SWEET HOME

City  
SWEET HOME

State  
OR

Zip Code  
97386-1290

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  
03 / 29 / 2016

**Transaction ID : SA11.16159063**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EISENBERG, HOWARD, M., MR.,**

Mailing Address 22 S GREENE ST  
12 DS

City  
BALTIMORE

State  
MD

Zip Code  
21201-1544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UMNA

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158347**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EISENBERG, HOWARD, M., MR.,**

Mailing Address 22 S GREENE ST  
12 DS

City  
BALTIMORE

State  
MD

Zip Code  
21201-1544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UMNA

Occupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159553**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLINGSWORTH, PATRICK, J., ,**

Mailing Address 6300 GREEN RANCH CIR.

City  
RENO

State  
NV

Zip Code  
89519-6317

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147213**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELLIOTT, RAYMOND, , ,**

Mailing Address 265 MOUNTAIN VIEW AVE

City

DANVILLE

State

VA

Zip Code

24541-3501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145730**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLIOTT, RAYMOND, , ,**

Mailing Address 265 MOUNTAIN VIEW AVE

City

DANVILLE

State

VA

Zip Code

24541-3501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149251**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELMORE, MARSHA, , MRS.,**

Mailing Address 1005 FM 1340

City  
HUNT

State  
TX

Zip Code  
78024-3027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OWNER/DIRECTOR WALDEMAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153195**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ELSON, DAVID, L., DR.,**

Mailing Address 513 E. PLUM CREEK ROAD

City

SIOUX FALLS

State

SD

Zip Code

57105-6950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AURORA MCKENNAN

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139715**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELVEKROG, JAN, , ,**

Mailing Address 1429 QUARTON ROAD

City

BIRMINGHAM

State

MI

Zip Code

48009-1036

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158972**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

405.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGELS, JOHN, L., JR.**

Mailing Address P.O. BOX 8132

City  
ASPEN

State  
CO

Zip Code  
81612-

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153641**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENGLISH, PHILIP, , HON.,**

Mailing Address 550 N STREET, SW

City  
WASHINGTON

State  
DC

Zip Code  
20024-4643

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARENT FOX LLP

Occupation (for Individual)  
CO-CHAIR OF GOVERNMENT RELAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155650**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENROTH, MARY, P., ,**

Mailing Address P.O. BOX 4646

City  
PINEHURST

State  
NC

Zip Code  
28374-4646

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142118**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESPOSITO, ANNE, ELIZABETH, MS.,**

Mailing Address 2425 L STREET, NW  
#527

City  
WASHINGTON

State  
DC

Zip Code  
20037-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INDIVIOR

Occupation (for Individual)

VP, GLOBAL GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141018**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EVERSULL, LEONARD, J., MR.,**

Mailing Address 5227 COLONIAL PARK LN

City  
KATY

State  
TX

Zip Code  
77494-3063

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143785**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVERSULL, LEONARD, J., MR.,**

Mailing Address 5227 COLONIAL PARK LN

City  
KATY

State  
TX

Zip Code  
77494-3063

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156023**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EYLES, SIMON, , ,**

Mailing Address 748 ARLINGTON ST

City  
HOUSTON

State  
TX

Zip Code  
77007-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIO ENERGY

Occupation (for Individual)  
OIL TRADER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140829**

Amount of Each Receipt this Period

502.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EYMAN, NATALIE, , ,**

Mailing Address 2862 WEST CANYON AVE

City  
SAN DIEGO

State  
CA

Zip Code  
92123-4648

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

**Transaction ID : SA11.16144738**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EYMAN, NATALIE, , ,**

Mailing Address 2862 WEST CANYON AVE

City  
SAN DIEGO

State  
CA

Zip Code  
92123-4648

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160730**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

577.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAILMEZGER, ROBERT, , MR,**

Mailing Address 105 CAMMOT LN

City  
FAYETTEVILLE

State  
NY

Zip Code  
13066-1425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16133259**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALVELLO, CONRAD, A., MR.,**

Mailing Address 314 MAIN STREET, SUITE A

City  
SUGARLOAF

State  
PA

Zip Code  
18249-3832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FALVELLO LAW FIRM

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139380**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARR, JOYCE, , MS.,**

Mailing Address 1939 WILDWOOD PL.

City  
MOBILE

State  
AL

Zip Code  
36609-2579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156736**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1260.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARR, KENNETH, , ,**

Mailing Address 595 ASHBURY FARMS DR.

City  
VANDALIA

State  
OH

Zip Code  
45377-8708

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141705**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARR, KENNETH, , ,**

Mailing Address 595 ASHBURY FARMS DR.

City  
VANDALIA

State  
OH

Zip Code  
45377-8708

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153266**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARR, KENNETH, , ,**

Mailing Address 595 ASHBURY FARMS DR.

City  
VANDALIA

State  
OH

Zip Code  
45377-8708

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162162**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARR, KENNETH, , ,**

Mailing Address 595 ASHBURY FARMS DR.

City  
VANDALIA

State  
OH

Zip Code  
45377-8708

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162165**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARRINGTON, BUFORD, L., MR.,**

Mailing Address 4600 NE PARK SPRINGS CT

City  
LEES SUMMIT

State  
MO

Zip Code  
64064-1775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HFM PC

Occupation (for Individual)  
PARTNER/ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141361**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARRIS, GEORGE, , ,**

Mailing Address P.O. BOX 61407

City  
HOUSTON

State  
TX

Zip Code  
77208-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
SELF EMPLOYED

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  
03 / 31 / 2016

**Transaction ID : SA11.16163537**

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)..... ►

605.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FAULKNER, JIM, , ,

Mailing Address 1S575 NIMITZ RD

City  
OAKBROOK TERRACE

State  
IL

Zip Code  
60181-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

Transaction ID : SA11.16144011

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FAULKNER, JIM, , ,

Mailing Address 1S575 NIMITZ RD

City  
OAKBROOK TERRACE

State  
IL

Zip Code  
60181-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153469

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FEEHAN, HUGH, , ,

Mailing Address 1322 SKIPWITH ROAD

City  
MCLEAN

State  
VA

Zip Code  
22101-1841

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162813

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEIDER, FRANCIS, J., MR.,**

Mailing Address 28 POINT ELKHART DR.

City  
ELKHART LAKE

State  
WI

Zip Code  
53020-1835

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161977**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FELLIN, TOM, , MR.,**

Mailing Address 1275 WESTERN SKIES TRAIL

City  
STEVENSVILLE

State  
MT

Zip Code  
59870-6821

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161789**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FERDINAND, WILLIAM, V., MR.,**

Mailing Address 31 GUINEA ROAD

City  
GREENWICH

State  
CT

Zip Code  
06830-3544

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154965**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

255.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FERDINAND, WILLIAM, V., MR.,**

Mailing Address 31 GUINEA ROAD

City  
GREENWICH

State  
CT

Zip Code  
06830-3544

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158689**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FERNANDEZ, GUILLERMO, A., MR.,**

Mailing Address 5441 BANYAN DR.

City  
CORAL GABLES

State  
FL

Zip Code  
33156-2117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163554**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIELD, DAVID, SCOTT, MR.,**

Mailing Address 8787 COMPLEX DRIVE  
SUITE 430

City  
SAN DIEGO

State  
CA

Zip Code  
92123-1453

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE GROUP

Occupation (for Individual)  
INSURANCE AGENT

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  
03 / 09 / 2016

**Transaction ID : SA11.16141084**

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)..... ►

860.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FIELDS, HENRY, W., MR., SR.**

Mailing Address 2115 1ST. AVE SE APT. 2218

City  
CEDAR RAPIDS

State  
IA

Zip Code  
52402-6384

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 ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163458**

Amount of Each Receipt this Period

355.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FIELDS, JACK, M., MR., JR.**

Mailing Address 8 DEER RIDGE ESTATES BOULEVARD

City  
KINGWOOD

State  
TX

Zip Code  
77339-3503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TWENTY-FIRST CENTURY GROUP

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155648**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINN, BERTRAM, P., MR.,**

Mailing Address 61 KINGS CT  
11W

City  
SAN JUAN

State  
PR

Zip Code  
00911-1663

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144106**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5405.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FINN, BERTRAM, P., MR.,**

Mailing Address 61 KINGS CT  
11W

City  
SAN JUAN

State  
PR

Zip Code  
00911-1663

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154530**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FINNANE, DANIEL, F., MR.,**

Mailing Address 46300 AMETHYST DR.

City

INDIAN WELLS

State

CA

Zip Code

92210-8611

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159065**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FINNANE, DANIEL, F., MR.,**

Mailing Address 46300 AMETHYST DR.

City

INDIAN WELLS

State

CA

Zip Code

92210-8611

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159067**

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISH, LORNA, M., MRS.,**

Mailing Address 3 W PICKERING BND

City  
RICHBORO

State  
PA

Zip Code  
18954-1540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1101.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147068**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISKE, GORDON, L., MR.,**

Mailing Address 1471 LONG POND RD APT. 350

City  
ROCHESTER

State  
NY

Zip Code  
14626-4140

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153856**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FITZWILLIAM, JEFFREY, W., MR.,**

Mailing Address 7297 ROYALGREEN DR.

City  
CINCINNATI

State  
OH

Zip Code  
45244-3650

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159862**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLORY, KENNETH, M., DR.,**

Mailing Address 1200 MONTCLAIR ST.

City  
LONGVIEWState  
TXZip Code  
75601-3564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2016

**Transaction ID : SA11.16137189**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLOYD, THOMAS, , ,**

Mailing Address 150 SHADY LANE

City  
BARTLETTState  
ILZip Code  
60103-4532FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAMURAI INVESTMENTS LLCOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16162397**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLYNN, WILLIAM, J., MR.,**Mailing Address 212 E. 57TH STREET  
APT PHCity  
NEW YORKState  
NYZip Code  
10022-2811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLAS AIR WORLDWIDEOccupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2016

**Transaction ID : SA11.16138396**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

34150.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, VICTORIA, I., MS.,**

Mailing Address 4303 FOREST PARK RD

City  
JACKSONVILLEState  
FLZip Code  
32210-6027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

**Transaction ID : SA11.16149783**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORGIE, PATRICIA, A., MS.,**

Mailing Address 1130 LOIS AVE NW

City  
NORTH CANTONState  
OHZip Code  
44720-1880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

**Transaction ID : SA11.16149305**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FORGIE, PATRICIA, A., MS.,**

Mailing Address 1130 LOIS AVE NW

City  
NORTH CANTONState  
OHZip Code  
44720-1880FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

**Transaction ID : SA11.16157651**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

675.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORGIE, PATRICIA, A., MS.,**

Mailing Address 1130 LOIS AVE NW

City  
NORTH CANTON

State  
OH

Zip Code  
44720-1880

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 ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160972**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORMICO, MARTE, , ,**

Mailing Address 2695 MOORPARK AVE  
SUITE 201

City  
SAN JOSE

State  
CA

Zip Code  
95128-4710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE

Occupation (for Individual)  
DISTRICT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138403**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOSS, THOMAS, A., MR.,**

Mailing Address 8751 PARKWAY DR.

City  
HIGHLAND

State  
IN

Zip Code  
46322-1519

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 ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136622**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRAHM, DONALD, R., MR.,**

Mailing Address 7 AVE DE LA MER APT 1006

City  
PALM COAST

State  
FL

Zip Code  
32137-1208

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 ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159860**

Amount of Each Receipt this Period

1125.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRAMBURG, LAWRENCE, A., MR.,**

Mailing Address 1555 N ASTOR S APT 33E

City  
CHICAGO

State  
IL

Zip Code  
60610-5775

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141563**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRAMBURG, LAWRENCE, A., MR.,**

Mailing Address 1555 N ASTOR S APT 33E

City  
CHICAGO

State  
IL

Zip Code  
60610-5775

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161580**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANSSON, MARTHA, , MS.,**

Mailing Address 11 DODGE DRIVE

City  
WEST HARTFORD

State  
CT

Zip Code  
06107-1009

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154912**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRAZEE, ELIZABETH, , MS.,**

Mailing Address 6313 EVERMAY DR.

City  
MC LEAN

State  
VA

Zip Code  
22101-2309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TWINLOGIC STRATEGIES

Occupation (for Individual)  
CONSULTANT/BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141006**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FREDRICK, ROBERT, S., DR.,**

Mailing Address 7161 HIDDEN VALLEY DR.

City  
LAMBERTVILLE

State  
MI

Zip Code  
48144-9452

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROBERT FREDRICK

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147138**

Amount of Each Receipt this Period

201.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5451.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRENCH, IRVIN, LEO, ,**

Mailing Address 1295 W COUNTY ROAD 60 S

City  
NORTH VERNONState  
INZip Code  
47265-7034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ON SITE MANUFACTURINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
03	14	2016

**Transaction ID : SA11.16145628**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIEDEL, ROBERT, O., DR.,**

Mailing Address 13722 HICKORY NUT POINTE

City  
MIDLOTHIANState  
VAZip Code  
23112-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROBERT O. FRIEDEL, M.D.Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
03	15	2016

**Transaction ID : SA11.16147103**

Amount of Each Receipt this Period

125.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FROGUE, JAMES, , ,**Mailing Address 1222 NORTH MEADE STREET  
18City  
ARLINGTONState  
VAZip Code  
22209-3724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FROGUECLARK LLCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M	D D	Y Y Y Y
03	01	2016

**Transaction ID : SA11.16135839**

Amount of Each Receipt this Period

12500.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

13125.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FROLOV, FELIX, , MR.,

Mailing Address 8180 MANITOBA ST. 319

City  
PLAYA DEL REY

State  
CA

Zip Code  
90293-8735

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

Transaction ID : SA11.16148881

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FURUBOTN, FLORENCE, D., MRS.,

Mailing Address 750 N ROSEMARY DR.

City  
BRYAN

State  
TX

Zip Code  
77802-4307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

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  
03 / 28 / 2016

Transaction ID : SA11.16156579

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FUSCO, CONO, , ,

Mailing Address 1160 PARK AVE

City  
NEW YORK

State  
NY

Zip Code  
10128-1212

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16141812

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUSSNER, CHRISTOPHER, J., MR.,**

Mailing Address A-3 SPIRIT DANCE ROAD

City  
JACKSON HOLE

State  
WY

Zip Code  
83001-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRANSTECHNOLOGY PTE LTD

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139379**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAFFNEY, MARCIA, , ,**

Mailing Address 234 CLINTON ST

City  
WHITESBORO

State  
NY

Zip Code  
13492-2531

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 ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149185**

Amount of Each Receipt this Period

275.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAFFNEY, MARCIA, , ,**

Mailing Address 234 CLINTON ST

City  
WHITESBORO

State  
NY

Zip Code  
13492-2531

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 ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154149**

Amount of Each Receipt this Period

275.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33950.00

# **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  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAFFNEY, MARCIA, , ,**

Mailing Address 234 CLINTON ST

City  
WHITESBORO

State  
NY

Zip Code  
13492-2531

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 ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161571**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAHAGAN, WILLIAM, G., MR.,**

Mailing Address 601 SMITHS BRIDGE ROAD

City  
WILMINGTON

State  
DE

Zip Code  
19807-1323

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GAHAGAN & BRYANT

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146445**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, J., JAMES, ,**

Mailing Address 2959 81ST PL SE  
APT 1

City  
MERCER ISLAND

State  
WA

Zip Code  
98040-3047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELLIOTT COVE CAPITAL MANAGEMENT

Occupation (for Individual)  
INVESTMENT ADVISOR

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  
03 / 28 / 2016

**Transaction ID : SA11.16155787**

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)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GAMBLE, JOSEPH, G., MR.,

Mailing Address 3333 SPRING VALLEY CT

City  
BIRMINGHAM

State  
AL

Zip Code  
35223-2006

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 ▼

1001.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16140776

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARBER, ANN, R., MRS.,

Mailing Address 200 E SOUTH ST

City  
CORYDON

State  
IA

Zip Code  
50060-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAYNE COUNTY

Occupation (for Individual)  
MENTAL HEALTH ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2016

Transaction ID : SA11.16143999

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARBER, ANN, R., MRS.,

Mailing Address 200 E SOUTH ST

City  
CORYDON

State  
IA

Zip Code  
50060-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAYNE COUNTY

Occupation (for Individual)  
MENTAL HEALTH ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146688

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

36.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GARBER, ANN, R., MRS.,

Mailing Address 200 E SOUTH ST

City  
CORYDON

State  
IA

Zip Code  
50060-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAYNE COUNTY

Occupation (for Individual)  
MENTAL HEALTH ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147300

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARBER, ANN, R., MRS.,

Mailing Address 200 E SOUTH ST

City  
CORYDON

State  
IA

Zip Code  
50060-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WAYNE COUNTY

Occupation (for Individual)  
MENTAL HEALTH ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16151915

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARCIA, GUILLERMO, , MR.,

Mailing Address 9401 SW 103 STREET

City  
MIAMI

State  
FL

Zip Code  
33176-3057

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16137172

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

126.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARCIA, GUILLERMO, , MR.,**

Mailing Address 9401 SW 103 STREET

City  
MIAMI

State  
FL

Zip Code  
33176-3057

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161150**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARCIA, MIKE, , MR.,**

Mailing Address 10121 ORANGE AVE

City  
CUPERTINO

State  
CA

Zip Code  
95014-2828

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 ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152740**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GARCIA, RAFAEL, , LTC, JR.**

Mailing Address 119 ROLLING MEADOW RD.

City  
MADISON

State  
CT

Zip Code  
06443-2309

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151577**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

520.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARD, DELPHA, G., MRS.,**

Mailing Address 9 HOSPITAL DR. APT  
APARTMENT 221

City  
CANYON

State  
TX

Zip Code  
79015-3100

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156598**

Amount of Each Receipt this Period

215.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARTON, PHILIP, , MR.,**

Mailing Address 4962 HIGHWOOD CIRCLE

City

MIDDLETON

State

WI

Zip Code

53562-1404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162557**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GATES, ALONZO, E., MR., II**

Mailing Address 785 BURR RD

City

SAN ANTONIO

State

TX

Zip Code

78209-6121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
RANCHER, OIL AND GAS INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

29760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140821**

Amount of Each Receipt this Period

17760.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAVIN, NORMAN, W., MR.,**

Mailing Address 364 EAGLE DR.

City  
JUPITER

State  
FL

Zip Code  
33477-4066

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160434**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAVIN, NORMAN, W., MR.,**

Mailing Address 364 EAGLE DR.

City  
JUPITER

State  
FL

Zip Code  
33477-4066

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160435**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEBARA, GABRIEL, CARLOS, MS.,**

Mailing Address 11381 LONGWATER CHASE CT

City  
FORT MYERS

State  
FL

Zip Code  
33908-4965

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 ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137768**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

320.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GELFAND, LILIYA, , MS.,**

Mailing Address 320 BRIGHTON BEACH AVE

City  
BROOKLYN

State  
NY

Zip Code  
11235-7413

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW TOURS

Occupation (for Individual)  
OWNER MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144841**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GELLERT, GREGORY, , MR.,**

Mailing Address 38330 LAKESHORE DR.

City  
HARRISON TOWNSHIP

State  
MI

Zip Code  
48045-2859

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MS CIS

Occupation (for Individual)  
ADJUDICATION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147082**

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GENTINE, LAWRENCE, J., ,**

Mailing Address 263 BAREFOOT BEACH BLVD  
PH-3

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-8599

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 ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153647**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1410.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GENTINE, LEE, , ,

Mailing Address 535 KRUMREY ST

City  
PLYMOUTHState  
WIZip Code  
53073-1118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158377

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEOFFREY, STEVE, O., MR.,

Mailing Address 216 KIOWA POINT

City  
LOUDONState  
TNZip Code  
37774-2923FEC 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 ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161758

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEORGE, RICHARD, N., MR.,

Mailing Address 1 SINCLAIR DRIVE APT 218

City  
PITTSFORDState  
NYZip Code  
14534-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142688

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERALDS, EMILY, S., MS.,**

Mailing Address 2224KIEV CT.

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48324-1338

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153278**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GERALDS, EMILY, S., MS.,**

Mailing Address 2224KIEV CT.

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48324-1338

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158513**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GERALDS, EMILY, S., MS.,**

Mailing Address 2224KIEV CT.

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48324-1338

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158514**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERWIN, PAUL, , ,**

Mailing Address 3114 GOLFSIDE DR.

City  
NAPLES

State  
FL

Zip Code  
34110-7005

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159975**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GESSNER, ROBERT, , MR.,**

Mailing Address 5331 KONEN AVE. NW

City  
CANTON

State  
OH

Zip Code  
44718-1544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCTV

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160806**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GIANOPOULOS, ANDY, , ,**

Mailing Address 5035 MAPLETON DR.

City  
WEST LINN

State  
OR

Zip Code  
97068-2149

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

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  
03 / 30 / 2016

**Transaction ID : SA11.16161237**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GIBB, ROBERT, M., ,**

Mailing Address 1 JOHN'S ISLAND DR.

City  
VERO BEACH

State  
FL

Zip Code  
32963-3234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN'S ISLAND REAL ESTATE CO

Occupation (for Individual)  
SALES

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  
03 / 31 / 2016

**Transaction ID : SA11.16161662**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIBLIN, KEVIN, , MR.,**

Mailing Address 259 TURNPIKE RD

City  
SOUTHBOROUGH

State  
MA

Zip Code  
01772-1706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRENDON HOMES

Occupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160741**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILBERT, JUDY, , MS.,**

Mailing Address 52 EAST END AVE  
33A

City  
NEW YORK

State  
NY

Zip Code  
10028-8096

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RG CONSULTING

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149393**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 169 OF 923

(check only one)

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILCHRIST, HENRY, , MR.,**

Mailing Address 1445 ROSS AVE STE. 3200

City  
DALLAS

State  
TX

Zip Code  
75202-2785

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HUNTEN AND WILLIAMS LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137121**

Amount of Each Receipt this Period

201.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLESPIE, CHARLES, M., MR.,**

Mailing Address 9 PROMENADE PLACE

City

VOORHEES

State

NJ

Zip Code

08043-4171

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160281**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLEY, DAVID, L., MR.,**

Mailing Address 1501 IRON LIEGE RD

City

INDIANAPOLIS

State

IN

Zip Code

46217-4441

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16148846**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

326.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLESPIE, MARIE, D., MS.,**

Mailing Address 3235 S RIVA RIDGE WAY

City  
BOISE

State  
ID

Zip Code  
83709-3806

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138919**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GILLESPIE, MARIE, D., MS.,**

Mailing Address 3235 S RIVA RIDGE WAY

City  
BOISE

State  
ID

Zip Code  
83709-3806

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138921**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GILLESPIE, MARIE, D., MS.,**

Mailing Address 3235 S RIVA RIDGE WAY

City  
BOISE

State  
ID

Zip Code  
83709-3806

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138922**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILLESPIE, MARIE, D., MS.,

Mailing Address 3235 S RIVA RIDGE WAY

City  
BOISEState  
IDZip Code  
83709-3806FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

Transaction ID : SA11.16173743

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLIAM, MARK, E., MR.,

Mailing Address 400 TRAVIS STREET  
SUITE 1700City  
SHREVEPORTState  
LAZip Code  
71101-3108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142934

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GJELDE, EARL, , MR.,

Mailing Address P.O. BOX 1235

City  
DILLONState  
COZip Code  
80435-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158405

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLENN, THOMAS, , MR.,

Mailing Address 1011 BARTLETT AVE

City  
LINWOODState  
NJZip Code  
08221-1137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLENN INSURANCE, INC.Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159108

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLENN, THOMAS, , MR.,

Mailing Address 1011 BARTLETT AVE

City  
LINWOODState  
NJZip Code  
08221-1137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLENN INSURANCE, INC.Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159109

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOBLIRSCH, ALOYSIUS, J., MR.,

Mailing Address 9738 221ST AVE NW

City  
ELK RIVERState  
MNZip Code  
55330-9242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPSOccupation (for Individual)  
POSTAL CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148344

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOFORTH, DANIEL, , MR.,**

Mailing Address 2 PINEWOLD CIRCLE

City  
HOUSTON

State  
TX

Zip Code  
77056-1400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOFORTH LAW FIRM PC

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162577**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOLDING, MICHAEL, S., MR.,**

Mailing Address 2400 S FINLEY RD APT 271

City  
LOMBARD

State  
IL

Zip Code  
60148-7023

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 ▼

531.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150321**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOOCH, LESLI, , ,**

Mailing Address 1655 N FT MYER DRIVE

City  
ARLINGTON

State  
VA

Zip Code  
22209-3113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANUFACTURED HOUSING INSTITUTE

Occupation (for Individual)  
SVP GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146665**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOOD, GERALD, , ,

Mailing Address 312 9TH ST

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034-2937

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  
03 / 10 / 2016

Transaction ID : SA11.16143167

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODALE, MARTIN, J., MR.,

Mailing Address 9930 EAST DIAMOND DRIVE

City  
SUN LAKES

State  
AZ

Zip Code  
85248-6235

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16147238

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODALE, MARTIN, J., MR.,

Mailing Address 9930 EAST DIAMOND DRIVE

City  
SUN LAKES

State  
AZ

Zip Code  
85248-6235

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153097

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODALE, MARTIN, J., MR.,

Mailing Address 9930 EAST DIAMOND DRIVE

City  
SUN LAKES

State  
AZ

Zip Code  
85248-6235

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154643

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODALE, MARTIN, J., MR.,

Mailing Address 9930 EAST DIAMOND DRIVE

City  
SUN LAKES

State  
AZ

Zip Code  
85248-6235

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158621

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODRICH, ED, B., MR.,

Mailing Address 3120 UPLANDS SE

City  
GRAND RAPIDS

State  
MI

Zip Code  
49506-1935

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RHOADES MCKEE

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158289

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

255.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOODRICH, JAON, , MRS.,**

Mailing Address P.O. BOX 32

City  
CLARKDALE

State  
AZ

Zip Code  
86324-0032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16175951**

Amount of Each Receipt this Period

-10000.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOORAHOO, SHERRIE, , MS.,**

Mailing Address 13906 FREDERICK AVE

City  
OMAHA

State  
NE

Zip Code  
68138-6299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AUBORN TRANSPORTATION CORP

Occupation (for Individual)

OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144227**

Amount of Each Receipt this Period

82.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOORAHOO, SHERRIE, , MS.,**

Mailing Address 13906 FREDERICK AVE

City  
OMAHA

State  
NE

Zip Code  
68138-6299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AUBORN TRANSPORTATION CORP

Occupation (for Individual)

OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158917**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

-9893.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOORAHOO, SHERRIE, , MS.,**

Mailing Address 13906 FREDERICK AVE

City  
OMAHA

State  
NE

Zip Code  
68138-6299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUBORN TRANSPORTATION CORP

Occupation (for Individual)  
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158918**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOORAHOO, SHERRIE, , MS.,**

Mailing Address 13906 FREDERICK AVE

City  
OMAHA

State  
NE

Zip Code  
68138-6299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUBORN TRANSPORTATION CORP

Occupation (for Individual)  
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161700**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOORAHOO, SHERRIE, , MS.,**

Mailing Address 13906 FREDERICK AVE

City  
OMAHA

State  
NE

Zip Code  
68138-6299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUBORN TRANSPORTATION CORP

Occupation (for Individual)  
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161702**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, DAVID, , ,**

Mailing Address P.O. BOX 937

City  
RANCHESTER

State  
WY

Zip Code  
82839-0937

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154787**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GOSS, ARTHUR, L., ,**

Mailing Address 2405 PATRIOT HTS APT 4415

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80904-5146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151932**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRAMATOVICI, RAZVAN, N., DR.,**

Mailing Address 1916 S QUAIL RUN

City  
COTTONWOOD

State  
AZ

Zip Code  
86326-7008

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158859**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

410.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAMATOVICI, RAZVAN, N., DR.,

Mailing Address 1916 S QUAIL RUN

City  
COTTONWOOD

State  
AZ

Zip Code  
86326-7008

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158860

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRASSO, ALYSON, , MS.,

Mailing Address 311 WEST BROADWAY 7E

City  
NEW YORK

State  
NY

Zip Code  
10013-3058

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 ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16138395

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAVES, MARY, M., MS.,

Mailing Address 3746 HADLEY HILL DRIVE

City  
SANTA ROSA

State  
CA

Zip Code  
95404-7681

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SONOMA STATE UNIVERSITY

Occupation (for Individual)  
INSTRUCTOR/AUTHOR/CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148573

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

10210.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRAY, C., BOYDEN, AMBASSADOR, ESQ.**

Mailing Address 1534 28TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20007-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOYDEN GRAY & ASSOCIATES

Occupation (for Individual)  
FOUNDING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16149095**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16143007**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143860**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148584**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153613**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158345**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREAVES, WILLIAM, W., MR.,**

Mailing Address 8851 N BAYSIDE DR.

City  
BAYSIDE

State  
WI

Zip Code  
53217-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABPM

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161484**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENE, DALE, H., MR.,**

Mailing Address 114 ABBEY LN

City  
TELFORD

State  
PA

Zip Code  
18969-2168

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145278**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREEN, DANIEL, , MR.,**

Mailing Address P.O. BOX 1053

City  
CORNELIUS

State  
OR

Zip Code  
97113-1053

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152265**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN, DANIEL, , MR.,**

Mailing Address P.O. BOX 1053

City  
CORNELIUS

State  
OR

Zip Code  
97113-1053

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160223**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREENBERG, FRANK, , ,**

Mailing Address 180 EAST END AVE  
9H

City  
NEW YORK

State  
NY

Zip Code  
10128-7763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BALTIC LINEN COMPANY

Occupation (for Individual)  
EXECUTIVE

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  
03 / 24 / 2016

**Transaction ID : SA11.16153204**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GREENLEE, JOHN, E., MR.,**

Mailing Address 366 GRAMMAR RD

City  
SANFORD

State  
ME

Zip Code  
04073-6127

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157062**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

401.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFIN, WAYNE, , MR., JR.**

Mailing Address 10250 CONSTELLATION BLVD  
STE 2600

City  
LOS ANGELES

State  
CA

Zip Code  
90067-6240

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 ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158481**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRIGGS, JAMES, CLAYTON, MR.,**

Mailing Address 260 WASHINGTON ST S

City  
SALEM

State  
OR

Zip Code  
97302-5147

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAALFELD GRIGGS

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150056**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROBERTS, WILLIAM, , ,**

Mailing Address 5701 BURLESON OAKS DR.

City  
BURLESON

State  
TX

Zip Code  
76028-1827

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140139**

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)..... ►

455.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROSS, INGE, E., ,**

Mailing Address 60 MEADOW LKS

City  
EAST WINDSOR

State  
NJ

Zip Code  
08520-4801

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147693**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROSS, INGE, E., ,**

Mailing Address 60 MEADOW LKS

City  
EAST WINDSOR

State  
NJ

Zip Code  
08520-4801

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157818**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GROSS, INGE, E., ,**

Mailing Address 60 MEADOW LKS

City  
EAST WINDSOR

State  
NJ

Zip Code  
08520-4801

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163316**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

301.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROTH, ELAYNE, D., MS.,

Mailing Address 9989 N LANGDON RD

City  
DUNNELLONState  
FLZip Code  
34434-3572FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150073

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROTH, ELAYNE, D., MS.,

Mailing Address 9989 N LANGDON RD

City  
DUNNELLONState  
FLZip Code  
34434-3572FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160903

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROTH, ELAYNE, D., MS.,

Mailing Address 9989 N LANGDON RD

City  
DUNNELLONState  
FLZip Code  
34434-3572FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16161175

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

260.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 187 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GROVES, HELEN, K., MRS.,**

Mailing Address 700 N. ST. MARY'S  
SUITE 1200

City  
SAN ANTONIO

State  
TX

Zip Code  
78205-3510

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139377

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROWN, ED, , MR.,**

Mailing Address 21101 CAMBRIDGE DR.

City  
NORTHVILLE

State  
MI

Zip Code  
48167-9063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BILL BROWN FORD

Occupation (for Individual)  
AUTO DEALER

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  
03 / 07 / 2016

Transaction ID : SA11.16140456

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUARISCO, FRANK, S., ,**

Mailing Address 1123 MAIN ST.

City  
PATTERSON

State  
LA

Zip Code  
70392-4545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRANK'S AGENCY, INC

Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137756

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUDA, JOHN, T., MR.,**

Mailing Address 911 BRITTNEY TERRACE

City  
DOWNTOWN

State  
PA

Zip Code  
19335-4423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ICFI

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159330**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUDA, JOHN, T., MR.,**

Mailing Address 911 BRITTNEY TERRACE

City  
DOWNTOWN

State  
PA

Zip Code  
19335-4423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ICFI

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159332**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138110**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138116**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153087**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160359**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 190 OF 923

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160375**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161909**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162713**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162717**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUEVARA, MARIETTA, S., MS.,**

Mailing Address 2016 GROVE PARK WAY

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIFE SAVVY WEIGHT LOSS CLINIC

Occupation (for Individual)  
DOCTOR OF MEDICINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162728**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUGGISBERG, FANNALOU, , REV.,**

Mailing Address 21017 N 125TH AVE

City  
SUN CITY WEST

State  
AZ

Zip Code  
85375-1922

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156701**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUINN, ALFRED, B., MR.,**

Mailing Address 1111 7TH ST

City  
WICHITA FALLS

State  
TX

Zip Code  
76301-2301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALSH AND WALTS INC

Occupation (for Individual)  
OIL AND GAS PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152518**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GUMP, RICHARD, , MR.,**

Mailing Address 6015 OAKCREST

City  
DALLAS

State  
TX

Zip Code  
75248-3852

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RICHARD A. GUMP, JR., P.C.

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143384**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUTTILLA, CAROLYN, , MS.,**

Mailing Address 7 G NOB HILL

City  
ROSELAND

State  
NJ

Zip Code  
07068-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160714**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00



# **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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAAGENSON, DEAN, , MR.,**

Mailing Address P.O. BOX 6300

City  
COEUR D ALENE

State  
ID

Zip Code  
83816-1938

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONTRACTORS NORTHWEST INC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159630**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HABER, LAWRENCE, D., MR.,**

Mailing Address 62 CHESTER ST

City  
STAMFORD

State  
CT

Zip Code  
06905-3944

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160309**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HACKNEY, T, MORRIS, ,**

Mailing Address 40 COUNTRY CLUB RD

City  
BIRMINGHAM

State  
AL

Zip Code  
35213-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149191**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HADLEY, GARY, , ,**

Mailing Address 5616 BUENA VISTA DRIVE

City  
FRISCO

State  
TX

Zip Code  
75034-2259

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEARNING ENTERPRISES LLC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147309**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGAN, ROBERT, W., MR.,**

Mailing Address 16 NORCROSS STREET  
SUITE 50

City  
ROSWELL

State  
GA

Zip Code  
30075-3864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STERLING HEALTH CARE

Occupation (for Individual)  
C E O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138394**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGERTY, LOUISE, , MRS.,**

Mailing Address P.O. BOX 789

City  
TRAVERSE CITY

State  
MI

Zip Code  
49685-0789

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137687**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 195 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAGERTY, LOUISE, , MRS.,**

Mailing Address P.O. BOX 789

City  
TRAVERSE CITY

State  
MI

Zip Code  
49685-0789

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142731

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALL, ROBERT, , ,**

Mailing Address 1815 INDEPENDENCE AVE.

City  
MELBOURNE

State  
FL

Zip Code  
32940-6849

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154875

Amount of Each Receipt this Period

275.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALL, ROBERT, , ,**

Mailing Address 1815 INDEPENDENCE AVE.

City  
MELBOURNE

State  
FL

Zip Code  
32940-6849

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16174572

Amount of Each Receipt this Period

-275.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALLAWAY, GENE, T., MR.,**

Mailing Address 14764 650ST

City  
CLAREMONT

State  
MN

Zip Code  
55924-4626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137027**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALVERSON, NOEL, , MR.,**

Mailing Address 1824 LYNCH CIR.

City  
STOUGHTON

State  
WI

Zip Code  
53589-3237

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  
03 / 21 / 2016

**Transaction ID : SA11.16150000**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAMBEL, AILISH, C., MRS.,**

Mailing Address 31 HAYWARD ROAD

City  
SPARTA

State  
NJ

Zip Code  
07871-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NJ TRANSIT

Occupation (for Individual)  
SAFETY EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154902**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMBEL, AILISH, C., MRS.,

Mailing Address 31 HAYWARD ROAD

City  
SPARTAState  
NJZip Code  
07871-3118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NJ TRANSIT

Occupation (for Individual)

SAFETY EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16160188

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMILTON, EARL, F., MR.,

Mailing Address 1884 KIMS COVE ROAD

City  
CANTONState  
NCZip Code  
28716-9130FEC 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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

Transaction ID : SA11.16143997

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, EARL, F., MR.,

Mailing Address 1884 KIMS COVE ROAD

City  
CANTONState  
NCZip Code  
28716-9130FEC 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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148645

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMILTON, EARL, F., MR.,

Mailing Address 1884 KIMS COVE ROAD

City  
CANTONState  
NCZip Code  
28716-9130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153506

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMPTON, CONNIE, , MS.,

Mailing Address 204 PINION ROAD

City  
BAILEYState  
COZip Code  
80421-2342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAIN CENTERS OF AMERICA, LLCOccupation (for Individual)  
R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154732

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANCOCK, CHARLES, , ,

Mailing Address P.O. BOX 4550

City  
ALBUQUERQUEState  
NMZip Code  
87196-4550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159093

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1300.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANCOCK, CHARLES, , ,**

Mailing Address P.O. BOX 4550

City  
**ALBUQUERQUE**

State  
**NM**

Zip Code  
**87196-4550**

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 ▼

**1000.00**

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16159094**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HANSON, STEVEN, , MR.,**

Mailing Address 28105 BOULDER BRIDGE

City  
**SHOREWOOD**

State  
**MN**

Zip Code  
**55331-7959**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**03 / 10 / 2016**

**Transaction ID : SA11.16144907**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARCLERODE, HOWARD, C., MR., II**

Mailing Address 1 COUNTRY CLUB LANE

City  
**PHOENIX**

State  
**MD**

Zip Code  
**21131-1835**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**KBD ENGINEERING COMPANY, INC.**

Occupation (for Individual)  
**ENGINEER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 28 / 2016**

**Transaction ID : SA11.16155730**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**2500.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARDAGE, JAMES, W., MR.,**

Mailing Address 1352 BRIDLE PATH LN.

City  
HIDEAWAY

State  
TX

Zip Code  
75771-5120

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143035**

Amount of Each Receipt this Period

120.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARDMAN, STANLEY, , ,**

Mailing Address 7306 W. 88TH. ST.

City  
LOS ANGELES

State  
CA

Zip Code  
90045-3466

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154913**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARMS, WILLARD, , ,**

Mailing Address 10120 TWO NOTCH RD STE 2 # 1

City  
COLUMBIA

State  
SC

Zip Code  
29223-4385

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BCBSSC

Occupation (for Individual)  
HEALTH INSURANCE ADMINISTRATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161906**

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)..... ►

470.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARNESS, BESSIE, W., ,**

Mailing Address 10963 POPLAR DR.

City  
LUSBY

State  
MD

Zip Code  
20657-2411

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148498**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARNED, GLENN, , MR.,**

Mailing Address 11644 CREST MAPLE DRIVE

City

WOODBIDGE

State

VA

Zip Code

22192-6640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GMH ASSOCIATES OF VA

Occupation (for Individual)  
DEFENSE CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139042**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARPER, MARILYN, K., MRS.,**

Mailing Address 3209 VIA LA SELVA

City

PALOS VERDES ESTATES

State

CA

Zip Code

90274-1051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF LA VERNE

Occupation (for Individual)  
READING SPECIALIST, M.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145561**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRELL, LINDA, , ,

Mailing Address 8420 CHALK KNOLL DR.

City  
AUSTINState  
TXZip Code  
78735-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 31 / 2016

Transaction ID : SA11.16161862

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, JOHN, O., , III.

Mailing Address 921 SHARON DRIVE

City

KINGS MOUNTAIN

State

NC

Zip Code

28086-2735

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
LAND DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16135941

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRISON, JOSHUA, M., MR.,

Mailing Address 207 LEE AVENUE

City

COLLEGE STATION

State

TX

Zip Code

77840-3178

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ATTORNEY

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  
03 / 29 / 2016

Transaction ID : SA11.16159171

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRINGTON, PAUL, , MR.,**

Mailing Address 2735 S. I-35 SERVICE RD.

City  
MOORE

State  
OK

Zip Code  
73160-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PAUL HARRINGTON INSURANCE AGENCY

Occupation (for Individual)

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138400**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARTUNG, ELISABETH, H., MS.,**

Mailing Address 1711 WATEREDGE DR.

City  
NAPLES

State  
FL

Zip Code  
34110-7912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NOT EMPLOYED

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159471**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HATCHER, MICHAEL, , MR.,**

Mailing Address 379 MATTHEW CV

City  
BASTROP

State  
TX

Zip Code  
78602-6739

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SAM, LLC

Occupation (for Individual)

PROFESSIONAL LAND SURVEYOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153508**

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)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HATHCOAT, BETTE, , MS.,

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2016

Transaction ID : SA11.16148832

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HATHCOAT, BETTE, , MS.,

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2016

Transaction ID : SA11.16148854

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HATHCOAT, BETTE, , MS.,

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154729

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

140.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HATHCOAT, BETTE, , MS.,**

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159308**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HATHCOAT, BETTE, , MS.,**

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162002**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HATHCOAT, BETTE, , MS.,**

Mailing Address 5346 ALAN AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95124-5748

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162003**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAUSER, WESLEY, , MR.,**

Mailing Address 3233 SMITHTOWN ROAD

City  
EAST BEND

State  
NC

Zip Code  
27018-8255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HKS HARDWARE

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154920**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAUSMAN, ANNA, L., MRS.,**

Mailing Address 485 LISA AVE

City  
ODENTON

State  
MD

Zip Code  
21113-2019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136194**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAVEN, LA-VONNE, , MS.,**

Mailing Address 9060 ASHVILLE DR.

City  
PENSACOLA

State  
FL

Zip Code  
32514-5691

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMP FIRE GULF WIND, INC.

Occupation (for Individual)  
YOUTH DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139061**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

435.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAVEN, LA-VONNE, , MS.,

Mailing Address 9060 ASHVILLE DR.

City  
PENSACOLA

State  
FL

Zip Code  
32514-5691

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMP FIRE GULF WIND, INC.

Occupation (for Individual)  
YOUTH DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148740

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAVEN, LA-VONNE, , MS.,

Mailing Address 9060 ASHVILLE DR.

City  
PENSACOLA

State  
FL

Zip Code  
32514-5691

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMP FIRE GULF WIND, INC.

Occupation (for Individual)  
YOUTH DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16152378

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAVEN, LA-VONNE, , MS.,

Mailing Address 9060 ASHVILLE DR.

City  
PENSACOLA

State  
FL

Zip Code  
32514-5691

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAMP FIRE GULF WIND, INC.

Occupation (for Individual)  
YOUTH DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160707

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

85.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAWKE, ROBERT, J., MR.,**

Mailing Address 8030 FRANKFORD RD  
APT 310

City  
DALLAS

State  
TX

Zip Code  
75252-6837

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145143**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAWKE, ROBERT, J., MR.,**

Mailing Address 8030 FRANKFORD RD  
APT 310

City  
DALLAS

State  
TX

Zip Code  
75252-6837

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147867**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAWKINS, STEPHEN, S., MR.,**

Mailing Address 5529 DIAMOND HEIGHTS BLVD.

City  
SAN FRANCISCO

State  
CA

Zip Code  
94131-2642

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151331**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

285.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAWKS, JOHN, CARNEY, MR.,

Mailing Address 12 DOUBLING ROAD

City  
GREENWICH

State  
CT

Zip Code  
06830-4846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRIGADE CAPITAL MANAGEMENT

Occupation (for Individual)  
FOUNDING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148257

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, RICHARD, , ,

Mailing Address 2265 MONACO PARKWAY

City  
DENVER

State  
CO

Zip Code  
80207-3952

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161954

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYS, PHILIP, , ,

Mailing Address 4037 N. 35TH STREET

City  
ARLINGTON

State  
VA

Zip Code  
22207-4427

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUECROSS BLUESHIELD ASSOC.

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139327

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

5600.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEFLICH, HERBERT, , ,

Mailing Address 5 VAN PELT COURT

City  
MARTINSVILLE

State  
NJ

Zip Code  
08836-2360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HEFLICH HERBERT

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153099

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEIDER, JON, V., ,

Mailing Address 2440 STOCKBRIDGE RD.

City  
AKRON

State  
OH

Zip Code  
44313-4580

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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16149206

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEISE, BARRETT, H., MR.,

Mailing Address 2245 TEAKWOOD CIR. APT. A

City  
HIGHLAND

State  
IN

Zip Code  
46322-3578

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 ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149764

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

2500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HEITMAN, MARY, R., ,**

Mailing Address 3181 STAGG HILL RD.

City  
MANHATTAN

State  
KS

Zip Code  
66502-8134

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149834**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HELBRAUN, MARK, , , M.D.**

Mailing Address 65 MORRISON STREET

City  
CLOSTER

State  
NJ

Zip Code  
07624-1128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLON & RECTAL SURGERY P.A.

Occupation (for Individual)  
SURGEON

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  
03 / 15 / 2016

**Transaction ID : SA11.16146747**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HELFT, ROBERT, L., MR.,**

Mailing Address 5353 ASCOT BND

City  
BOCA RATON

State  
FL

Zip Code  
33496-1606

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150726**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

655.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, FRANCISCA, , MRS.,**

Mailing Address 122 N 82ND ST

City  
MESA

State  
AZ

Zip Code  
85207-8529

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 ▼

766.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143721**

Amount of Each Receipt this Period

90.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENDERSON, FRANCISCA, , MRS.,**

Mailing Address 122 N 82ND ST

City  
MESA

State  
AZ

Zip Code  
85207-8529

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 ▼

766.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143725**

Amount of Each Receipt this Period

180.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENDERSON, FRANCISCA, , MRS.,**

Mailing Address 122 N 82ND ST

City  
MESA

State  
AZ

Zip Code  
85207-8529

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 ▼

766.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156873**

Amount of Each Receipt this Period

270.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

540.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENDERSON, FRANCISCA, , MRS.,**

Mailing Address 122 N 82ND ST

City  
MESA

State  
AZ

Zip Code  
85207-8529

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 ▼

766.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159893**

Amount of Each Receipt this Period

180.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, GRACE, , MRS.,**

Mailing Address 6555 GREEN SPARROW LN

City

N. LAS VEGAS

State

NV

Zip Code

89084-2235

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154600**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, GRACE, , MRS.,**

Mailing Address 6555 GREEN SPARROW LN

City

N. LAS VEGAS

State

NV

Zip Code

89084-2235

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154601**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENRY, GRACE, , MRS.,**

Mailing Address 6555 GREEN SPARROW LN

City

N. LAS VEGAS

State

NV

Zip Code

89084-2235

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159450**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HENRY, GRACE, , MRS.,**

Mailing Address 6555 GREEN SPARROW LN

City

N. LAS VEGAS

State

NV

Zip Code

89084-2235

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162345**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HENRY, GRACE, , MRS.,**

Mailing Address 6555 GREEN SPARROW LN

City

N. LAS VEGAS

State

NV

Zip Code

89084-2235

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162346**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HENSON, E, EDDIE, ,**

Mailing Address 3115 S COLUMBIA CIR

City  
TULSA

State  
OK

Zip Code  
74105-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156762**

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERFORT, THOMAS, W., MR.,**

Mailing Address 204 HARRISON ST STE 3

City

IRONWOOD

State

MI

Zip Code

49938-1776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

SELF EMPLOYED

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  
03 / 22 / 2016

**Transaction ID : SA11.16151835**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERNDON, CHRISTOPHER, C., MR.,**

Mailing Address 6219 26TH RD N.

City

ARLINGTON

State

VA

Zip Code

22207-1001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169746**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1475.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERSON, STEPHEN, , MR.,**

Mailing Address 146 WHITNEY HILL RD

City  
TUNBRIDGE

State  
VT

Zip Code  
05077-9642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147292**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERSON, STEPHEN, , MR.,**

Mailing Address 146 WHITNEY HILL RD

City  
TUNBRIDGE

State  
VT

Zip Code  
05077-9642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153075**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERSON, STEPHEN, , MR.,**

Mailing Address 146 WHITNEY HILL RD

City  
TUNBRIDGE

State  
VT

Zip Code  
05077-9642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160300**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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 Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERTZ, DANIEL, L., , JR.

Mailing Address P.O. BOX 407

City  
RED BANKState  
NJZip Code  
07701-0407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SEALS EASTERN INCOccupation (for Individual)  
EXECUTIVE

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  
 03 / 29 / 2016

Transaction ID : SA11.16158365

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERTZOG, ROBERT, W., MR.,

Mailing Address 34 RUSKIN CT

City  
EAST AURORAState  
NYZip Code  
14052-1419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
 03 / 31 / 2016

Transaction ID : SA11.16163619

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERTZ, STEVEN, J., MR.,

Mailing Address P.O. BOX 563

City  
SOUTH ORLEANSState  
MAZip Code  
02662-0563FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

Transaction ID : SA11.16141587

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HERTZ, STEVEN, J., MR.,**

Mailing Address P.O. BOX 563

City

SOUTH ORLEANS

State

MA

Zip Code

02662-0563

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156545**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERZING, HENRY, G., MR.,**

Mailing Address 1660 N. PROSPECT AVENUE  
UNIT 1009

City

MILWAUKEE

State

WI

Zip Code

53202-6706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HERZING UNIVERSITY

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138398**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERZOG, BOB, C., MR., JR.**

Mailing Address 235 MAIN ST.

City

PLEASANTON

State

CA

Zip Code

94566-8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FARMERS INSURANCE GROUP

Occupation (for Individual)

AGENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138405**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

5550.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HESS, CHARLES, W., MR.,**

Mailing Address 70 KENDALL DRIVE

City  
RINGWOOD

State  
NJ

Zip Code  
07456-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
NUCLEAR ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160759**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEWES, ROBERT, MORRIS, MR.,**

Mailing Address 24151 COMEGYS BIGHT LANE

City  
CHESTERTOWN

State  
MD

Zip Code  
21620-5228

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 ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148655**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEYEN, GEORGE, , ,**

Mailing Address 1385 TIMOTHY ROAD

City  
ATHENS

State  
GA

Zip Code  
30606-3828

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141674**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGGINS, JOHN, C., , SR.**

Mailing Address 3806 FAIRDALE RD.

City  
PHILADELPHIA

State  
PA

Zip Code  
19154-3404

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155440**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HIGGINBOTHAM, RICHARD, A., MR.,**

Mailing Address 315 SOUTH LAKE DRIVE,  
1-B

City  
PALM BEACH

State  
FL

Zip Code  
33480-4525

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155196**

Amount of Each Receipt this Period

450.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGGINBOTHAM, RICHARD, A., MR.,**

Mailing Address 315 SOUTH LAKE DRIVE,  
1-B

City  
PALM BEACH

State  
FL

Zip Code  
33480-4525

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158956**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1060.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 221 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HIGHT, DEBORAH, , MS.,**

Mailing Address 4814 MIRROR LAKE DRIVE

City  
POWDER SPRINGS

State  
GA

Zip Code  
30127-4910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
R&D PRINTING, INC

Occupation (for Individual)  
SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158901**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINKEL, MARY ELLEN, , ,**

Mailing Address 22N CHIMNEY POINT RD

City  
NEW MILFORD

State  
CT

Zip Code  
06776-4710

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138789**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIPPS, GRACE, , ,**

Mailing Address P.O. BOX 1358

City  
PINE

State  
AZ

Zip Code  
85544-1358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

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  
03 / 14 / 2016

**Transaction ID : SA11.16145312**

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)..... ►

460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 222 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HITT, JOSEPH, E., MR., III

Mailing Address 5672 DOROTHY WAY

City  
SAN DIEGO

State  
CA

Zip Code  
92115-2307

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16146637

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOBBS, DAVID, W., MR.,

Mailing Address 1903 MALLINSON WAY  
SUITE 601

City  
ALEXANDRIA

State  
VA

Zip Code  
22308-2760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE HOBBS GROUP, LLC

Occupation (for Individual)  
PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148192

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HODDINOTT, BERT, , , III.

Mailing Address 6N067 WOODVIEW LN

City  
SAINT CHARLES

State  
IL

Zip Code  
60175-6158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BJH - GRAPHICS, LLC

Occupation (for Individual)  
YES

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  
03 / 16 / 2016

Transaction ID : SA11.16147413

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

5550.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HODGE, ROBERT, J., ,

Mailing Address 614 WATCHCOVE CT

City  
CINCINNATIState  
OHZip Code  
45230-3777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146029

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HODGE, ROBERT, J., ,

Mailing Address 614 WATCHCOVE CT

City  
CINCINNATIState  
OHZip Code  
45230-3777FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149967

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HODGES, ROY, F., ,

Mailing Address P.O. BOX 663

City  
DUMASState  
MSZip Code  
38625-0663FEC 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 ▼

411.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16140831

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

256.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOENEMEYER, FRANK, J., MR.,

Mailing Address 97 CAPTAINS WALK

City  
NORTH CHATHAM

State  
MA

Zip Code  
02650-1041

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  
03 / 21 / 2016

Transaction ID : SA11.16150755

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFFMAN, GARY, , ,

Mailing Address 10561 HAWKS TERRACE

City  
WEST PALM BEACH

State  
FL

Zip Code  
33412-

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  
03 / 29 / 2016

Transaction ID : SA11.16158769

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOGAN, DIARMUID, M., MR.,

Mailing Address 137 RIDGE TOP LANE

City  
SALEM

State  
SC

Zip Code  
29676-3243

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161760

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).....▶

750.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOGAN, RANDALL, J., MR.,**

Mailing Address 15491 ESTANCIA LANE

City  
WELLINGTON

State  
FL

Zip Code  
33414-7408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENTAIR

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162127**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOGAN, RANDALL, J., MR.,**

Mailing Address 15491 ESTANCIA LANE

City  
WELLINGTON

State  
FL

Zip Code  
33414-7408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENTAIR

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162128**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLDER, CLAUDIA, D., MS.,**

Mailing Address 12433 W DR. MEYER ST

City  
BOISE

State  
ID

Zip Code  
83713-1403

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 ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16144914A**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK \$100.00 ON 03/03/2016

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLDER, CLAUDIA, D., MS.,**

Mailing Address 12433 W DR. MEYER ST

City  
BOISE

State  
ID

Zip Code  
83713-1403

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 ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16144914B**

Amount of Each Receipt this Period

-100.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLDEN, JOHN, S., MR.,**

Mailing Address 44434 ASPEN RIDGE DR.

City

NORTHVILLE

State

MI

Zip Code

48168-4427

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150720**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOLDEN, JOHN, S., MR.,**

Mailing Address 44434 ASPEN RIDGE DR.

City

NORTHVILLE

State

MI

Zip Code

48168-4427

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151804**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLAND, CLYDE, P., MR.,**

Mailing Address 1111 MAIN STREET  
SUITE 700

City  
VANCOUVER

State  
WA

Zip Code  
98660-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOLLAND PARTNER GROUP

Occupation (for Individual)  
PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155644**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HONEYCUTT, ANN, , ,**

Mailing Address 5223 WHITNEY CT.

City  
PASADENA

State  
TX

Zip Code  
77505-2840

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136348**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOOKER, ALICE, JANE, MS.,**

Mailing Address P.O. BOX 2049

City  
ALBANY

State  
TX

Zip Code  
76430-8001

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149045**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1201.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOOKER, ALICE, JANE, MS.,

Mailing Address P.O. BOX 2049

City  
ALBANY

State  
TX

Zip Code  
76430-8001

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162639

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOOVEL, MARGARET, , MRS.,

Mailing Address 2809 CALDWELL LANE

City  
GENEVA

State  
IL

Zip Code  
60134-4484

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  
03 / 09 / 2016

Transaction ID : SA11.16142941

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOOVEL, MARGARET, , MRS.,

Mailing Address 2809 CALDWELL LANE

City  
GENEVA

State  
IL

Zip Code  
60134-4484

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  
03 / 21 / 2016

Transaction ID : SA11.16151342

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOPKINS, BRYANT, L., MR., JR.

Mailing Address 3608 36TH ROAD N.

City  
ARLINGTON

State  
VA

Zip Code  
22207-4819

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 ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142874

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOPKINS, BRYANT, L., MR., JR.

Mailing Address 3608 36TH ROAD N.

City  
ARLINGTON

State  
VA

Zip Code  
22207-4819

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 ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158700

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HORAN, MIKE, , MR.,

Mailing Address 243 PONCE DE LEON AVE.

City  
VENICE

State  
FL

Zip Code  
34285-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AJAX PAVING INDUSTRIES

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142837

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

550.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORAN, MIKE, , MR.,**

Mailing Address 243 PONCE DE LEON AVE.

City  
VENICE

State  
FL

Zip Code  
34285-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AJAX PAVING INDUSTRIES

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161872**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORDON, BEVERLY, , ,**

Mailing Address 150 ROUTE 521

City  
NEWTON

State  
NJ

Zip Code  
07860-6453

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  
03 / 29 / 2016

**Transaction ID : SA11.16159205**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HORNE, KENNETH, C., MR.,**

Mailing Address 4972 HEATHER POINT

City  
BIRMINGHAM

State  
AL

Zip Code  
35242-3950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLLEGIATE ADMISSION & RETENION SOLUTI

Occupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151461**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOULIHAN, JOYCE, , ,**

Mailing Address 4 ST ANDREWS COURT

City  
FRISCO

State  
TX

Zip Code  
75034-6822

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16143015**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOULIHAN, JOYCE, , ,**

Mailing Address 4 ST ANDREWS COURT

City  
FRISCO

State  
TX

Zip Code  
75034-6822

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158657**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUBBART, NANCY, L., MS.,**

Mailing Address 3095 KEY HARBOUR DRIVE

City  
LAKE ST LOUIS

State  
MO

Zip Code  
63367-2097

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN POOLPLAYERS ASSOCIATION, INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138226**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUDSON, JEAN, MARIE, MS.,**

Mailing Address 5985 MEADOW WAY

City  
BEAUMONT

State  
TX

Zip Code  
77707-1833

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154562**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUGHEN, KEN, , ,**

Mailing Address 928 JUSTIN DR.

City  
YUKON

State  
OK

Zip Code  
73099-2150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
A-1 FREEMAN MOVING GROUP

Occupation (for Individual)  
CORP SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135915**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGHEN, KEN, , ,**

Mailing Address 928 JUSTIN DR.

City  
YUKON

State  
OK

Zip Code  
73099-2150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
A-1 FREEMAN MOVING GROUP

Occupation (for Individual)  
CORP SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153832**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHES, LOUIS, , MR.,

Mailing Address 86 INDIAN HILL ROAD

City  
WINNETKAState  
ILZip Code  
60093-3934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159641

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUMPHREYS, DAVID, C., MR.,

Mailing Address P.O. BOX 4050

City  
JOPLINState  
MOZip Code  
64803-4050FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAMKOOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148254

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUMPHREYS, DEBRA, , MRS.,

Mailing Address P.O. BOX 4050

City  
JOPLINState  
MOZip Code  
64803-4050FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148260

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

66900.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUMPHREY, DIANE, S., MRS.,**

Mailing Address 2279 E. 250 N.

City  
**BLUFFTON**

State  
**IN**

Zip Code  
**46714-9206**

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 ▼

**201.00**

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA11.16151077**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, STEPHEN, , ,**

Mailing Address 1505 CRYSTAL DR.  
707

City  
**ARLINGTON**

State  
**VA**

Zip Code  
**22202-4115**

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 ▼

**350.00**

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16159213**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUNTER, CLARICE, , MRS.,**

Mailing Address 423 HALSEY ST  
#1

City  
**BROOKLYN**

State  
**NY**

Zip Code  
**11233-1014**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ROBERTS & FLORA**

Occupation (for Individual)  
**SELF-EMPLOYED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**301.00**

Date of Receipt

**03 / 10 / 2016**

**Transaction ID : SA11.16143729**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**450.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUPP, DONALD, J., MR.,**

Mailing Address 2520 E ELLIOTT ST.

City  
WICHITA FALLS

State  
TX

Zip Code  
76308-3707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUNN OIL COMPANY

Occupation (for Individual)  
PRESIDENT

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  
03 / 11 / 2016

**Transaction ID : SA11.16143911**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURD, THOMAS, O., MR.,**

Mailing Address 801 SPYGLASS DRIVE

City  
BEDFORD

State  
IN

Zip Code  
47421-9295

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137710**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HURD, THOMAS, O., MR.,**

Mailing Address 801 SPYGLASS DRIVE

City  
BEDFORD

State  
IN

Zip Code  
47421-9295

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152027**

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

365.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HURTADO, GUILLERMO, , ,**

Mailing Address 111 SHELLEY AVE

City  
CAMPBELL

State  
CA

Zip Code  
95008-7078

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COBHAM

Occupation (for Individual)  
THECNICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137758**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURTADO, GUILLERMO, , ,**

Mailing Address 111 SHELLEY AVE

City  
CAMPBELL

State  
CA

Zip Code  
95008-7078

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COBHAM

Occupation (for Individual)  
THECNICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148762**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUSSEY, BILL, , ,**

Mailing Address 1676 LAGO VISTA BLVD

City  
PALM HARBOR

State  
FL

Zip Code  
34685-3329

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149420**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

570.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HYDE, OLIN, V., MR.,**

Mailing Address 36 MAJOR GINTER COURT

City  
RICHMOND

State  
VA

Zip Code  
23227-3354

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153115**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HYNES, KEITH, , MR.,**

Mailing Address 3331 CREEKVIEW DR.

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-2625

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147622**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INGRAHAM, RODNEY, A., MRS.,**

Mailing Address 420 N. ALMANSOR STREET

City  
ALHAMBRA

State  
CA

Zip Code  
91801-2623

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137503**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IONEL, MARSAVELA, , ,**

Mailing Address P.O. BOX 1548

City  
LOMA LINDA

State  
CA

Zip Code  
92354-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
S B LOGISTICS

Occupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161063**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IREDALE, NANCY, L., ,**

Mailing Address 515 S. FLOWER STREET  
25TH FLOOR

City  
LOS ANGELES

State  
CA

Zip Code  
90071-2228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAUL HASTINGS

Occupation (for Individual)  
TAX PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154956**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRELAND, ROSS, , ,**

Mailing Address 351 MONTAIR DRIVE

City  
DANVILLE

State  
CA

Zip Code  
94526-3754

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144079**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 239 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. IRVINE, WILLIAM, H., MR.,**

Mailing Address 703 AVENIDA PEQUENA

City  
SANTA BARBARA

State  
CA

Zip Code  
93111-1415

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147752**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. IRVINE, WILLIAM, H., MR.,**

Mailing Address 703 AVENIDA PEQUENA

City  
SANTA BARBARA

State  
CA

Zip Code  
93111-1415

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150978**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRVINE, WILLIAM, H., MR.,**

Mailing Address 703 AVENIDA PEQUENA

City  
SANTA BARBARA

State  
CA

Zip Code  
93111-1415

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160087**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

300.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IRWIN, BARBARA, , ,

Mailing Address P.O. BOX 98

City  
BLACK OAK

State  
AR

Zip Code  
72414-0098

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136358

Amount of Each Receipt this Period

103.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ISAACS, JAMES, , MR.,

Mailing Address 220 CLARK DRIVE

City  
SAN MATEO

State  
CA

Zip Code  
94402-1005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOCANA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16135797

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ISAACS, JAMES, , MR.,

Mailing Address 220 CLARK DRIVE

City  
SAN MATEO

State  
CA

Zip Code  
94402-1005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOCANA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16135952

Amount of Each Receipt this Period

40.20

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

393.20

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135837**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16136956**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137761**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154553**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154747**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ISOM, JEFF, , MR.,**

Mailing Address 4014 COBBLERS LANE

City  
DALLAS

State  
TX

Zip Code  
75287-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PLAINS CAPITAL CORPORATION

Occupation (for Individual)  
EVP ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154935**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IVERS, DONALD, , MR.,

Mailing Address 1511 PAUL SPRING PARKWAY

City

ALEXANDRIA

State

VA

Zip Code

22308-1143

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  
03 / 30 / 2016

Transaction ID : SA11.16160704

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACOBS, JOEY, A., MR.,

Mailing Address 9229 HUNTERBORO DRIVE

City

BRENTWOOD

State

TN

Zip Code

37027-6104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ACADIA

Occupation (for Individual)

C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148252

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACOLICK, HARVEY, , ,

Mailing Address 28202 BEDFORD DR.

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-1478

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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2016

Transaction ID : SA11.16144098

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

33600.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAMES, TOM, , ,**

Mailing Address 1630 SEAWAY DRIVE  
106

City  
FORT PIERCE

State  
FL

Zip Code  
34949-3108

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144110**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAMES, WILLIAM, R., MR.,**

Mailing Address 217 W. CAPITOL STREET  
SUITE 201

City  
JACKSON

State  
MS

Zip Code  
39201-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRUET PRODUCTION COMPANY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159698**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENKINS, CLAY, A., MR.,**

Mailing Address 3730 MARGUERITE ST.

City  
GADSDEN

State  
AL

Zip Code  
35903-7637

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149683**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

5350.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, EDWIN, J., MR., III**

Mailing Address P.O. BOX 55487

City  
HOUSTON

State  
TX

Zip Code  
77255-5487

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16136977**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, EDWIN, J., MR., III**

Mailing Address P.O. BOX 55487

City  
HOUSTON

State  
TX

Zip Code  
77255-5487

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143928**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JENNINGS, EDWIN, J., MR., III**

Mailing Address P.O. BOX 55487

City  
HOUSTON

State  
TX

Zip Code  
77255-5487

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144047**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENNINGS, MICHAEL, , MR.,**

Mailing Address 3111 FAIRWAY OAKS

City  
LONGVIEW

State  
TX

Zip Code  
75605-2654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137754**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENNINGS, MICHAEL, , MR.,**

Mailing Address 3111 FAIRWAY OAKS

City  
LONGVIEW

State  
TX

Zip Code  
75605-2654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138803**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHANN, WALTER, D., ,**

Mailing Address 3580 SHAW AVE APT 436

City  
CINCINNATI

State  
OH

Zip Code  
45208-1474

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160892**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

470.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHN, DENISE, , MS.,**

Mailing Address 1205 WILLIAMSBURG WAY

City  
CHARLESTON

State  
WV

Zip Code  
25314-1937

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143826**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHN, DENISE, , MS.,**

Mailing Address 1205 WILLIAMSBURG WAY

City  
CHARLESTON

State  
WV

Zip Code  
25314-1937

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161860**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, DALE, A., MR.,**

Mailing Address 3 BIRCHWOOD RD

City  
SAINT PAUL

State  
MN

Zip Code  
55115-1824

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156026**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNS, GREGORY, L., MR.,**

Mailing Address 1345 PARK HILL LANE

City  
ESCONDIDO

State  
CA

Zip Code  
92025-5233

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155699**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, JOANNE, , ,**

Mailing Address P.O. BOX 66

City  
RIDDLE

State  
OR

Zip Code  
97469-0066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150757**

Amount of Each Receipt this Period

310.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, JOANNE, T., MS.,**

Mailing Address 70 ROBLEY ROAD

City  
SALINAS

State  
CA

Zip Code  
93908-8900

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 ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148064**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1410.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, MARK, E., DR.,**Mailing Address 1605 N. RIVER RIDGE BLVD  
500City  
SPOKANEState  
WAZip Code  
99224-5381FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PROVIDENCE HEALTH AND SERVICES

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

**Transaction ID : SA11.16159311**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, MARGARET, E., MRS.,**

Mailing Address 52 MISSIONARY RD APT 5203

City

CROMWELL

State

CT

Zip Code

06416-2170

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 ▼

226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

**Transaction ID : SA11.16146001**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, MARGARET, E., MRS.,**

Mailing Address 52 MISSIONARY RD APT 5203

City

CROMWELL

State

CT

Zip Code

06416-2170

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 ▼

226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16164315**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

725.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, MATTHEW, , ,**

Mailing Address 5608 GROVE ST.

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PODESTA GROUP

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1924.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153178**

Amount of Each Receipt this Period

770.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, RICHARD, C., ,**

Mailing Address 4387 GRATTAN PRICE DRIVE

City  
HARRISONBURG

State  
VA

Zip Code  
22801-2351

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  
03 / 29 / 2016

**Transaction ID : SA11.16158626**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, ROBERT, M., MR.,**

Mailing Address 1176 ORLO DRIVE

City  
MCLEAN

State  
VA

Zip Code  
22102-1706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE JOHNSON GROUP

Occupation (for Individual)  
FILM PRODUCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16152492**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3020.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSTON, SAMUEL, F., MR.,**

Mailing Address 5343 MILTON RANCH RD

City

SHINGLE SPGS

State

CA

Zip Code

95682-5107

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 ▼

235.00

Date of Receipt

03 / 29 / 2016

Transaction ID : SA11.16159919

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, STANLEY, M., MR.,**

Mailing Address 105 MADERA CT.

City

LOS GATOS

State

CA

Zip Code

95032-5712

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 ▼

210.00

Date of Receipt

03 / 29 / 2016

Transaction ID : SA11.16158993

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, DUDLEY, DAVENPORT, DR., M.D.**

Mailing Address 300 N CREEKWOOD DR.

City

MANSFIELD

State

TX

Zip Code

76063-5428

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

03 / 21 / 2016

Transaction ID : SA11.16149769

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

345.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, GARRY, , MRS.,**

Mailing Address 38646 PALMYRE DR.

City  
LEBANON

State  
OR

Zip Code  
97355-9284

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16158071**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, NANCY, W., ,**

Mailing Address 10607 N. HIDDEN CREEK CT, 74W

City  
MEQUON

State  
WI

Zip Code  
53092-8544

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148597**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JONES, NANCY, W., ,**

Mailing Address 10607 N. HIDDEN CREEK CT, 74W

City  
MEQUON

State  
WI

Zip Code  
53092-8544

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160548**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

710.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JONES, RICHARD, H., MR., SR.

Mailing Address 12916 BAY PLANTATION DRIVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32223-0784

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 ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141059

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, THOMAS, C., MR.,

Mailing Address 4831 SW PARKGATE BLVD

City  
PALM CITY

State  
FL

Zip Code  
34990-4416

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160576

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN, MARTHA, J., ,

Mailing Address P.O. BOX 117

City  
COLUMBUS

State  
TX

Zip Code  
78934-0117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162826

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

10850.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JUDSON, ROBERT, , MR.,**

Mailing Address 3 TURTLE GROVE LANE

City  
VILLAGE OF GOLF

State  
FL

Zip Code  
33436-5626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KC FUNDING, LLC

Occupation (for Individual)  
SCHOOL OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142854**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JUDSON, ROBERT, , MR.,**

Mailing Address 3 TURTLE GROVE LANE

City  
VILLAGE OF GOLF

State  
FL

Zip Code  
33436-5626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KC FUNDING, LLC

Occupation (for Individual)  
SCHOOL OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161889**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JUILLARD, DONALD, L., MR.,**

Mailing Address 06747 COUNTY ROAD 19

City  
STRYKER

State  
OH

Zip Code  
43557-9760

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 ▼

566.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147815**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

515.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JUILLARD, DONALD, L., MR.,**

Mailing Address 06747 COUNTY ROAD 19

City  
STRYKER

State  
OH

Zip Code  
43557-9760

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 ▼

566.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150311

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KACZMAREK, DEBRA, L., MS.,**

Mailing Address 13094 DANUBE LANE

City  
ROSEMOUNT

State  
MN

Zip Code  
55068-4379

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162432

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAHN, DOUGLAS, A., MR.,**

Mailing Address 2249 TWIN ISLANDS CT.

City  
ANN ARBOR

State  
MI

Zip Code  
48108-8657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF MICHIGAN

Occupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153175

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 256 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAMPFE, PATRICIA, , ,**

Mailing Address 3224 ROCK WOOD LANE W

City  
ESTES PARK

State  
CO

Zip Code  
80517-6804

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 / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16155042**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAPLAN, JERRY, , MR.,**

Mailing Address 5100 SAN FELIPE ST. UNIT 331E

City  
HOUSTON

State  
TX

Zip Code  
77056-3620

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156711**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KARLSON, VICTORIA, , MRS.,**

Mailing Address 801 DRESHER WAY

City  
WAYNE

State  
PA

Zip Code  
19087-2061

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159266**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

710.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KARLSON, VICTORIA, , MRS.,

Mailing Address 801 DRESHER WAY

City  
WAYNEState  
PAZip Code  
19087-2061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159267

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KARP, ALEXANDER, , MR.,

Mailing Address 100 HAMILTON AVE  
SUITE 300City  
PALO ALTOState  
CAZip Code  
94301-1651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PALANTIR TECHNOLOGIESOccupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16169755

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAUFFMAN, ANNE, B., MRS.,

Mailing Address 114 KENDAL DR.

City  
GRANVILLEState  
OHZip Code  
43023-8026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16160168

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

20185.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KAUFMANN, BERNARD, P., ,**

Mailing Address 778 INDIAN HILLS RD.  
P.O. BOX 409

City  
FONTANA

State  
WI

Zip Code  
53125-1549

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  
03 / 07 / 2016

**Transaction ID : SA11.16139255**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KAZMANN, HOLLIS, B., MRS.,**

Mailing Address 6536 BELMONT ST

City  
HOUSTON

State  
TX

Zip Code  
77005-3804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBIL

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143486**

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KAZMIR, SUNDES, , DR.,**

Mailing Address 30 CAROLINE COURT

City  
CLOSTER

State  
NJ

Zip Code  
07624-2338

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YALE-NEW HAVEN HOSPITAL

Occupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16152496**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEEN, MALCOLM, L., MR.,**

Mailing Address 13918 RAMHURST DR. UNIT 2

City  
LA MIRADA

State  
CA

Zip Code  
90638-1732

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  
03 / 14 / 2016

**Transaction ID : SA11.16145948**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEHR, BRUCE, , ,**

Mailing Address 5920 HUBBARD DRIVE

City  
ROCKVILLE

State  
MD

Zip Code  
20852-4823

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
POTOMAC PSYCHIATRY

Occupation (for Individual)  
PSYCHIATRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139106**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEISER, BELINDA, , MRS.,**

Mailing Address 6069 NW 87TH AVENUE

City  
PARKLAND

State  
FL

Zip Code  
33067-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEISER UNIVERSITY

Occupation (for Individual)  
VICE CHANCELLOR OF COMMUNITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151460**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEITH, DAVID, L., MR.,**

Mailing Address 1775 WESTCHESTER DR.  
116 APT 116

City  
HIGH POINT

State  
NC

Zip Code  
27262-7274

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153457**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEITH, FRED, R., MR., JR.**

Mailing Address 3266 LARAMIE DRIVE NW

City  
ATLANTA

State  
GA

Zip Code  
30339-4336

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATLANTA BONDED WAREHOUSE CORP.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155657**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KELLY, CAROL, A., MS.,**

Mailing Address 3901 HIGHWOOD COURT NW

City  
WASHINGTON

State  
DC

Zip Code  
20007-2132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL ASSOC. OF CHAIN DRUG STORES

Occupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155092**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6050.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLY, RICHARD, , ,

Mailing Address 6222 CARDENO DRIVE

City  
LA JOLLAState  
CAZip Code  
92037-6925FEC 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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155681

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEMPNER, NEALE, W., ,

Mailing Address 4718 HALLMARK DRIVE  
906City  
HOUSTONState  
TXZip Code  
77056-3909FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162496

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEMPNER, NEALE, W., ,

Mailing Address 4718 HALLMARK DRIVE  
906City  
HOUSTONState  
TXZip Code  
77056-3909FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162497

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KENNEDY, DEAN, , ,**

Mailing Address 1004 S SIERRA VISTA AVE

City  
ALHAMBRA

State  
CA

Zip Code  
91801-4818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149498**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERCKHOVE, GEORGE, H., MR.,**

Mailing Address 1604 SHENANDOAH DRIVE

City  
WAUNAKEE

State  
WI

Zip Code  
53597-2342

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162315**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KERCKHOVE, GEORGE, H., MR.,**

Mailing Address 1604 SHENANDOAH DRIVE

City  
WAUNAKEE

State  
WI

Zip Code  
53597-2342

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162316**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KHAN, AHMAD, H., MR.,**

Mailing Address 6015 CHARRINGTON DR.

City  
SPRING

State  
TX

Zip Code  
77389-2933

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

D.R. HORTON

Occupation (for Individual)

CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145148**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KHAN, AHMAD, H., MR.,**

Mailing Address 6015 CHARRINGTON DR.

City  
SPRING

State  
TX

Zip Code  
77389-2933

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

D.R. HORTON

Occupation (for Individual)

CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163647**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KHAN, AHMAD, H., MR.,**

Mailing Address 6015 CHARRINGTON DR.

City  
SPRING

State  
TX

Zip Code  
77389-2933

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

D.R. HORTON

Occupation (for Individual)

CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16164172**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KIDD, BILLY, , MR.,

Mailing Address 10050 NE 20TH AVE

City  
CHIEFLANDState  
FLZip Code  
32626-3584FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
03 / 29 / 2016

Transaction ID : SA11.16159749

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIEFFER, PIERRE, , ,

Mailing Address 610 ELMHURST CIRCLE

City  
SACRAMENTOState  
CAZip Code  
95825-6640FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137791

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KILLIAN, HOMER, L., MR.,

Mailing Address 8101 HIDDEN VALLEY DR. SE

City  
LACEYState  
WAZip Code  
98503-1927FEC 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 ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152783

Amount of Each Receipt this Period

105.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

375.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KILTS, JAMES, M., MR.,**

Mailing Address 3 GREENWICH OFFICE PARK

City  
GREENWICH

State  
CT

Zip Code  
06831-5154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERVIEW PARTNERS

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160804**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIME, CARL, , ,**

Mailing Address 2231 N QUEBEC ST

City  
ARLINGTON

State  
VA

Zip Code  
22207-3815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LODESTAR STRATEGIES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148256**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, ROBERT, , ,**

Mailing Address 982 PO BOX

City  
W BROOKFIELD

State  
MA

Zip Code  
01585-0982

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16132867**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, WILLIAM, , ,

Mailing Address 634 S DAISY AVE

City  
SANTA ANA

State  
CA

Zip Code  
92703-4211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
COMMISSION SALES

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  
03 / 14 / 2016

Transaction ID : SA11.16145347

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRSTEN, REINER, , MS.,

Mailing Address 995 PARK VIEW DRIVE

City  
TALLAHASSEE

State  
FL

Zip Code  
32311-1245

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160364

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KIRSTEN, REINER, , MS.,

Mailing Address 995 PARK VIEW DRIVE

City  
TALLAHASSEE

State  
FL

Zip Code  
32311-1245

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161768

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

360.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLAENHAMMER, BRYAN, L., MR.,**

Mailing Address W6455 780TH AVE.

City  
RIVER FALLS

State  
WI

Zip Code  
54022-4528

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  
03 / 29 / 2016

**Transaction ID : SA11.16158336**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLAUSMAN, C. WILLIAM, , ,**

Mailing Address 2746 BLUE HERON DR.

City  
HUDSON

State  
OH

Zip Code  
44236-1879

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATTORNEY

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139330**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLEIN, HOWARD, , MR.,**

Mailing Address 13608 JARRETTSVILLE PIKE

City  
PHOENIX

State  
MD

Zip Code  
21131-2024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KLEIN'S SHOPRITE MD

Occupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140817**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KLEIN, ROGER, , ,

Mailing Address 63 BEETHOVEN AVE

City  
WABANState  
MAZip Code  
02468-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANAGEROccupation (for Individual)  
VARIOUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154626

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLUTTS, JOE, R., MR.,

Mailing Address 221 RLUE DEJEAN

City  
LAFAYETTEState  
LAZip Code  
70508-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
OIL & GAS EXPLORATIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143494

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLUTTS, JOE, R., MR.,

Mailing Address 328 W MARTIAL AVE

City  
LAFAYETTEState  
LAZip Code  
70508-6711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
GEOLOGIST

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  
03 / 17 / 2016

Transaction ID : SA11.16148021

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNAGGS, EDWARD, A., ,**

Mailing Address 715 COLWYN TER

City  
DEERFIELD

State  
IL

Zip Code  
60015-3111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
03 / 23 / 2016

**Transaction ID : SA11.16152501**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNORP, ALBERT, , ,**

Mailing Address 499 SEAPORT COURT STE. 302

City  
REDWOOD CITY

State  
CA

Zip Code  
94063-2792

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SEAPORT VENTURES LP

Occupation (for Individual)

INVESTMENTS

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  
03 / 28 / 2016

**Transaction ID : SA11.16157078**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOX, JAMES, , ,**

Mailing Address 2215 N. CLEVELAND AVE.

City  
CHICAGO

State  
IL

Zip Code  
60614-3703

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  
03 / 31 / 2016

**Transaction ID : SA11.16162529**

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNOX, ROBERT, , MR.,**

Mailing Address 53 SONGBIRD LN

City  
ROCHESTER

State  
NY

Zip Code  
14620-3174

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139782**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNOX, RONALD, F., MR.,**

Mailing Address 1256 W HICKORY SPRINGS CT

City  
BRENTWOOD

State  
TN

Zip Code  
37027-4002

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144999**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KNOX, RONALD, F., MR.,**

Mailing Address 1256 W HICKORY SPRINGS CT

City  
BRENTWOOD

State  
TN

Zip Code  
37027-4002

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156728**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNUTH, STEVEN, R., MR.,**

Mailing Address 887 HIGHLANDER TRAIL

City  
HUDSONState  
WIZip Code  
54016-7970FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUBLIC AFFAIRS COMPANYOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M	D D	Y Y Y Y
03	24	2016

**Transaction ID : SA11.16155643**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOCZYNSKI, CHET, , ,**

Mailing Address 1796 N. RIDLEY CREEK ROAD

City  
MEDIAState  
PAZip Code  
19063-4524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GLAXOSMITHKLINEOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
03	05	2016

**Transaction ID : SA11.16138203**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOEHL, MARY, GUBBELS, ,**

Mailing Address 1307 MANOR LAKE CT

City  
RICHMONDState  
TXZip Code  
77406-7999FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M	D D	Y Y Y Y
03	16	2016

**Transaction ID : SA11.16147841**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

2675.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 923

(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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOEHL, MARY, GUBBELS, ,

Mailing Address 1307 MANOR LAKE CT

City  
RICHMONDState  
TXZip Code  
77406-7999FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11.16164059

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOLOVOS, GEORGE, , MR.,

Mailing Address 12424 WILSHIRE BLVD  
STE 1040City  
LOS ANGELESState  
CAZip Code  
90025-1071FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

Transaction ID : SA11.16145201

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOLSTAD, DOUGLAS, , MR.,

Mailing Address 613 PAUL ST

City  
SUN PRAIRIEState  
WIZip Code  
53590-1315FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : SA11.16141497

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

361.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOPEC, JULIANA, S., MS.,**

Mailing Address 2711 WESTMINSTER ROAD

City  
ELLICOTT CITY

State  
MD

Zip Code  
21043-3599

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146806**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOPEC, JULIANA, S., MS.,**

Mailing Address 2711 WESTMINSTER ROAD

City  
ELLICOTT CITY

State  
MD

Zip Code  
21043-3599

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160699**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORBATOV, LISA, , MS.,**

Mailing Address 624 NORTH RODEO DRIVE

City  
BEVERLY HILLS

State  
CA

Zip Code  
90210-3208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE

Occupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16152493**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KRESSLER, MICHAEL, A., MR.,**

Mailing Address 111 4TH AVENUE SE

City  
GLEN BURNIE

State  
MD

Zip Code  
21061-3613

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 ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142674**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRESSLER, MICHAEL, A., MR.,**

Mailing Address 111 4TH AVENUE SE

City  
GLEN BURNIE

State  
MD

Zip Code  
21061-3613

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 ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147167**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRETZSCHMAR, TED, , MR.,**

Mailing Address 5011 LONDON WALK

City  
MIAMI

State  
FL

Zip Code  
33138-2257

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
50STATE SECURITY

Occupation (for Individual)  
EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149373**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KREYENHAGER, SHEILAN, , ,**

Mailing Address 1001 FOLSON ST

City  
COALINGA

State  
CA

Zip Code  
93210-1327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16144464**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRIEGHBAUM, KURT, , MR.,**

Mailing Address 1321 CANTERBURY CIRCLE

City  
LIBERTYVILLE

State  
IL

Zip Code  
60048-3070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDLINE INDUSTRIES

Occupation (for Individual)  
SALE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143142**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRIEGHBAUM, KURT, , MR.,**

Mailing Address 1321 CANTERBURY CIRCLE

City  
LIBERTYVILLE

State  
IL

Zip Code  
60048-3070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDLINE INDUSTRIES

Occupation (for Individual)  
SALE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158555**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1010.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KROL, JOHN, A., MR.,**

Mailing Address 4851 BONITA BAY BLVD PH101

City

BONITA SPRINGS

State

FL

Zip Code

34134-3618

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143064**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KROL, JOHN, A., MR.,**

Mailing Address 4851 BONITA BAY BLVD PH101

City

BONITA SPRINGS

State

FL

Zip Code

34134-3618

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146832**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KROL, JOHN, A., MR.,**

Mailing Address 4851 BONITA BAY BLVD PH101

City

BONITA SPRINGS

State

FL

Zip Code

34134-3618

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153102**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KROL, JOHN, A., MR.,**

Mailing Address 4851 BONITA BAY BLVD PH101

City

BONITA SPRINGS

State

FL

Zip Code

34134-3618

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158373**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRUSE, PAUL, , MR.,**

Mailing Address 3880 MUSTANG ROAD

City

BRENNHAM

State

TX

Zip Code

77833-9260

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BLUE BELL CREAMERIES

Occupation (for Individual)

PRESIDENT & CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148255**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUEHN, DUANE, , ,**

Mailing Address 436 E. BRANDON DR.

City

BISMARCK

State

ND

Zip Code

58503-0409

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162843**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

1325.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUPPUSAMI, MUTHUSAMI, , ,**

Mailing Address 109 WINDSOR CIR

City  
BLUEFIELD

State  
VA

Zip Code  
24605-9324

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  
03 / 03 / 2016

**Transaction ID : SA11.16137827**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LABRIOLA, FRANCIS, , MR.,**

Mailing Address 12013 S HONAH LEE CT

City  
PHOENIX

State  
AZ

Zip Code  
85044-3452

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158510**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAGANGA, SCOTT, , MR.,**

Mailing Address 1024 N UTAH ST. APT. 318

City  
ARLINGTON

State  
VA

Zip Code  
22201-5734

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155651**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANDY, MORTON, S., ,

Mailing Address PO BOX 126

City  
MAHAFFEY

State  
PA

Zip Code  
15757-0126

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16146617

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, FRANK, , ,

Mailing Address 641 E. CARMEN AVE.

City  
FRESNO

State  
CA

Zip Code  
93728-1714

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  
03 / 19 / 2016

Transaction ID : SA11.16148874

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANG, FRANK, , ,

Mailing Address 641 E. CARMEN AVE.

City  
FRESNO

State  
CA

Zip Code  
93728-1714

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  
03 / 24 / 2016

Transaction ID : SA11.16153349

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

370.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANG, FRANK, H., MR.,

Mailing Address 641 EAST CARMEN AVE.

City  
FRESNOState  
CAZip Code  
93728-1714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159633

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, SANDRA, , MRS.,

Mailing Address 190 BOOTLEGEE LANE

City  
KERRVILLEState  
TXZip Code  
78028-7597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153774

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANG, SANDRA, , MRS.,

Mailing Address 190 BOOTLEGEE LANE

City  
KERRVILLEState  
TXZip Code  
78028-7597FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153775

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANKLER, GREGORY, M., MR.,**

Mailing Address 15500 PENNYROYAL LANE

City  
ROCKVILLE

State  
MD

Zip Code  
20853-1477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCURY

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138397**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANTIS, TRAVIS, , ,**

Mailing Address 6627 CENTENNIAL RD

City  
SPEARFISH

State  
SD

Zip Code  
57783-9498

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEI

Occupation (for Individual)  
YES

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  
03 / 09 / 2016

**Transaction ID : SA11.16142980**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARKINS, BLAIR, , ,**

Mailing Address 3101 NORTH HAMPTON DRIVE  
APT 1101

City  
ALEXANDRIA

State  
VA

Zip Code  
22302-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOCKORNY GROUP

Occupation (for Individual)  
GOVERNMENTAL AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155835**

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)..... ►

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARSON, MICHAEL, , MR.,**

Mailing Address 12207 GAINES WAY

City  
WALTON

State  
KY

Zip Code  
41094-9319

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143901**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LARSON, MICHAEL, , MR.,**

Mailing Address 12207 GAINES WAY

City  
WALTON

State  
KY

Zip Code  
41094-9319

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158770**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LARSON, WILFRED, J., MR.,**

Mailing Address 200 BAHIA PT

City  
NAPLES

State  
FL

Zip Code  
34103-3511

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145445**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LASERSOHN, THOMAS, DANIEL, MR.,**

Mailing Address 304 NORTH AVENUE

City  
WESTPORT

State  
CT

Zip Code  
06880-1328

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151455**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAUN, JOHN, L., MR., III**

Mailing Address 585 ROSECRANS ST

City  
SAN DIEGO

State  
CA

Zip Code  
92106-3456

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  
03 / 31 / 2016

**Transaction ID : SA11.16161814**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAVID, GEORGE, D., MR.,**

Mailing Address 11415 W TAFT ST

City  
WICHITA

State  
KS

Zip Code  
67209-1032

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145037**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 284 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAWRENCE, JOHN, W., MR.,

Mailing Address 4949 RIDGEWOOD  
APT 801

City  
RICHLAND

State  
MI

Zip Code  
49083-9401

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 ▼

601.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136372

Amount of Each Receipt this Period

601.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWRENCE, TIMOTHY, , MR.,

Mailing Address 700 5TH ST NW  
SECOND FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20001-2752

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155653

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZARUS, ARTHUR, M., MRS.,

Mailing Address 48 TILLOU RD WEST

City  
SOUTH ORANGE

State  
NJ

Zip Code  
07079-1357

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16155008

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

3201.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LE, HUONG, , MRS.,

Mailing Address 9278 ADELPHI RD  
 301

City  
 HYATTSVILLE

State  
 MD

Zip Code  
 20783-2031

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 MEDSTAR WITE

Occupation (for Individual)  
 NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2016

Transaction ID : SA11.16143482

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LE, HUONG, , MRS.,

Mailing Address 9278 ADELPHI RD  
 301

City  
 HYATTSVILLE

State  
 MD

Zip Code  
 20783-2031

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 MEDSTAR WITE

Occupation (for Individual)  
 NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2016

Transaction ID : SA11.16148326A

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
 CONTRIBUTION

CHARGED BACK \$3,000.00 ON 03/18/2016

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LE, HUONG, , MRS.,

Mailing Address 9278 ADELPHI RD  
 301

City  
 HYATTSVILLE

State  
 MD

Zip Code  
 20783-2031

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 MEDSTAR WITE

Occupation (for Individual)  
 NURSE/RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016

Transaction ID : SA11.16148326B

Amount of Each Receipt this Period

-3000.00

☐ Memo Item  
 CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEACH, WILLIE, C., JR.**

Mailing Address 4474 RIVERCLIFF DR.

City  
LILBURN

State  
GA

Zip Code  
30047-4731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161518**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEBENS, LUCIA, , ,**

Mailing Address 161 BARRETT PL.

City

ALEXANDRIA

State

VA

Zip Code

22304-7763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NAVIENT

Occupation (for Individual)

GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138218**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, BARBARA, A., ,**

Mailing Address 9383 RALEIGH RD

City

BENSON

State

NC

Zip Code

27504-7115

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 ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136297**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

235.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, BARBARA, A., ,

Mailing Address 9383 RALEIGH RD

City  
BENSONState  
NCZip Code  
27504-7115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139949

Amount of Each Receipt this Period

230.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, DORIS, S., ,

Mailing Address 3271 SOUTH HIGHLAND DRIVE STE 704

City  
LAS VEGASState  
NVZip Code  
89109-1051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
URBAN LAND OF NVOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139402

Amount of Each Receipt this Period

501.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, ELEANOR, , MS.,

Mailing Address 1930 W. RIVER BEND CT.

City  
MEQUONState  
WIZip Code  
53092-2925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16138860

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

831.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, ELEANOR, , MS.,**

Mailing Address 1930 W. RIVER BEND CT.

City  
MEQUON

State  
WI

Zip Code  
53092-2925

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 / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153173**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, ELEANOR, , MS.,**

Mailing Address 1930 W. RIVER BEND CT.

City  
MEQUON

State  
WI

Zip Code  
53092-2925

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 / D D / Y Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154777**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, RICHARD, T., MR.,**

Mailing Address P.O. BOX 2113

City  
ORLANDO

State  
FL

Zip Code  
32802-2113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEE USTA COMPANIES

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16147277**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, RONALD, , ,**

Mailing Address 5435 QUAIL MEADOWS DRIVE

City  
CARMEL

State  
CA

Zip Code  
93923-7967

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149379**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, SHIRLEY, , MRS.,**

Mailing Address 402 DANIEL DRIVE

City  
BRANDON

State  
MS

Zip Code  
39047-7396

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159700**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEFF, GARY, IRWIN, ,**

Mailing Address 26901 AGOURA RD STE 180

City  
AGOURA HILLS

State  
CA

Zip Code  
91301-5120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149219**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEFKIN, PETER, A., MR.,**

Mailing Address 4112 38TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20016-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANZ OF AMERICA

Occupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169743**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LENTZ, HOVER, T., MR.,**

Mailing Address 7501 E THOMPSON PEAK PKWY UNIT 210

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255-4532

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 ▼

481.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156827**

Amount of Each Receipt this Period

240.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEONARD, THOMAS, , ,**

Mailing Address 41 WILLOW CREEK LANE

City  
DANVILLE

State  
CA

Zip Code  
94506-4504

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  
03 / 09 / 2016

**Transaction ID : SA11.16142945**

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)..... ►

1490.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LESTER, ONA, F., MRS.,**

Mailing Address 1101 HUMPHRIES RD. NW

City  
CONYERS

State  
GA

Zip Code  
30012-2015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149720**

Amount of Each Receipt this Period

355.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVIN, HERBERT, A., MR.,**

Mailing Address 724 E GRINNELL DR.

City  
BURBANK

State  
CA

Zip Code  
91501-1720

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145959**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVIN, HERBERT, A., MR.,**

Mailing Address 724 E GRINNELL DR.

City  
BURBANK

State  
CA

Zip Code  
91501-1720

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152838**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

505.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVY, EDWARD, C., MR., JR.

Mailing Address 970 SHIRLEY ROAD

City  
BIRMINGHAMState  
MIZip Code  
48009-3730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDWARD C. LEVY CO.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16155078

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVY, EDWARD, C., MR., JR.

Mailing Address 970 SHIRLEY ROAD

City  
BIRMINGHAMState  
MIZip Code  
48009-3730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDWARD C. LEVY CO.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155646

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVY, LEORA, R., MS.,

Mailing Address 59 PECKSLAND ROAD

City  
GREENWICHState  
CTZip Code  
06831-3711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

11250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148051

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

13000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEVY, LEORA, R., MS.,**

Mailing Address 59 PECKSLAND ROAD

City  
GREENWICH

State  
CT

Zip Code  
06831-3711

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 ▼

11250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148640**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, JAMES, , ,**

Mailing Address 2416 COUNTRY CLUB DR.

City  
LYNN HAVEN

State  
FL

Zip Code  
32444-1996

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 ▼

2001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136284**

Amount of Each Receipt this Period

2001.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, VERNON, F., MR.,**

Mailing Address 204 E SANTA CRUZ DR.

City  
GOODYEAR

State  
AZ

Zip Code  
85338-1429

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 ▼

601.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151105**

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)..... ►

3251.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LI, QIAOZH, , ,**

Mailing Address 1945 CONTRA COSTA BLVD  
2343

City  
PLEASANT HILL

State  
CA

Zip Code  
94523-8099

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138196**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIDE, FRANCIS, P., MR.,**

Mailing Address 108 CALVERLEY AVE

City  
HOUGHTON

State  
MI

Zip Code  
49931-2253

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149395**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LIND, WILLIAM, P., MR.,**

Mailing Address 65 CASSANDRA BLVD UNIT 202

City  
W HARTFORD

State  
CT

Zip Code  
06107-3149

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 ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145571**

Amount of Each Receipt this Period

235.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1335.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDHOU, WILLIAM, PIERCE, ,**

Mailing Address 3535 BEATTIE RD.

City  
HOWELL

State  
MI

Zip Code  
48843-8838

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LINDHOUT ASSOCIATES

Occupation (for Individual)  
ARCHITECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143074**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDHOU, WILLIAM, PIERCE, ,**

Mailing Address 3535 BEATTIE RD.

City  
HOWELL

State  
MI

Zip Code  
48843-8838

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LINDHOUT ASSOCIATES

Occupation (for Individual)  
ARCHITECTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159579**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDLEY, COREY, B., ,**

Mailing Address 263 S. ROYAL ANN CIRCLE

City  
OREM

State  
UT

Zip Code  
84058-5357

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DOTERRA

Occupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149109**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LINGER, AVIS, D., MS.,

Mailing Address 274 TERRACE AVE

City  
WESTONState  
WVZip Code  
26452-1539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147875

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINTHORST, PAUL, E., MR.,

Mailing Address 19 HUNTWOOD PLACE

City  
MOUNT VERNONState  
NYZip Code  
10552-1215FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 13 / 2016

Transaction ID : SA11.16144161

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LIPSEY, SUZANNE, H., MS.,

Mailing Address P.O. BOX 7795

City  
AVONState  
COZip Code  
81620-7795FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2005.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143895

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LIPSEY, SUZANNE, H., MS.,**

Mailing Address P.O. BOX 7795

City  
AVON

State  
CO

Zip Code  
81620-7795

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 ▼

2005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158737**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIPSEY, SUZANNE, H., MS.,**

Mailing Address P.O. BOX 7795

City  
AVON

State  
CO

Zip Code  
81620-7795

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 ▼

2005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162245**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LISLE, BRUCE, , MR.,**

Mailing Address PO BOX 211

City  
MIFFLINTOWN

State  
PA

Zip Code  
17059-0211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENERGEX CORP

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149125**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOFTUS, SHEILA, M., MS.,**

Mailing Address 240 CO RD 100 E

City  
IVESDALE

State  
IL

Zip Code  
61851-9714

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 ▼

235.00

Date of Receipt

**03 / 16 / 2016**

**Transaction ID : SA11.16147592**

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOFTUS, SHEILA, M., MS.,**

Mailing Address 240 COUNTY ROAD 100 E

City  
IVESDALE

State  
IL

Zip Code  
61851-9714

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 ▼

286.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA11.16150647**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOFTUS, SHEILA, M., MS.,**

Mailing Address 240 COUNTY ROAD 100 E

City  
IVESDALE

State  
IL

Zip Code  
61851-9714

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 ▼

286.00

Date of Receipt

**03 / 23 / 2016**

**Transaction ID : SA11.16152544**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOFTUS, WILLIAM, P., MR.,**

Mailing Address 343 GRAYS LANE

City  
HAVERFORD

State  
PA

Zip Code  
19041-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ACCENTURE

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169760**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGOTHETIS, MARIE, , ,**

Mailing Address 47 THE SERPENTINE

City  
ROSLYN

State  
NY

Zip Code  
11576-1711

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 ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163714**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGSDON, GENEVIEVE, , MS.,**

Mailing Address 17960 ROYAL OAK CT

City  
TINLEY PARK

State  
IL

Zip Code  
60477-4183

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 ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136112**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

5056.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOGSDON, GENEVIEVE, , MS.,

Mailing Address 17960 ROYAL OAK CT

City  
TINLEY PARKState  
ILZip Code  
60477-4183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136218

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOGSDON, GENEVIEVE, , MS.,

Mailing Address 17960 ROYAL OAK CT

City  
TINLEY PARKState  
ILZip Code  
60477-4183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136224

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOGSDON, GENEVIEVE, , MS.,

Mailing Address 17960 ROYAL OAK CT

City  
TINLEY PARKState  
ILZip Code  
60477-4183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16140680

Amount of Each Receipt this Period

6.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

106.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOKBOJ, JORI, , ,**

Mailing Address 143 KUHUI ST

City  
KAHULUI

State  
HI

Zip Code  
96732-2904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MAUI MARHALLESE MINISTRY

Occupation (for Individual)  
CLERGY MAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

**03 / 14 / 2016**

**Transaction ID : SA11.16146063**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, BILLY, WAYNE, MR.,**

Mailing Address 110 COACHMAN'S RD

City  
MADISON

State  
MS

Zip Code  
39110-9227

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16148258**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONG, RYAN, , ,**

Mailing Address 16 S. LEXINGTON ST.

City  
ARLINGTON

State  
VA

Zip Code  
22204-1145

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BGR GROUP

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

**03 / 06 / 2016**

**Transaction ID : SA11.16138270**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOOS, DONALD, , ,**

Mailing Address 3821 BRAE BURN DRIVE

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-3607

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138107**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOOS, DONALD, , ,**

Mailing Address 3821 BRAE BURN DRIVE

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-3607

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138237**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOPATKA, LINDA, , ,**

Mailing Address 2850 KANANI ST.

City  
LIHUE

State  
HI

Zip Code  
96766-1625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NOT EMPLOYED

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159581**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOWE, BRIAN, , MR.,**

Mailing Address 7816 MAUI CIR

City  
DIAMONDHEAD

State  
MS

Zip Code  
39525-3633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137049**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOWELL, MELVIN, E., MR.,**

Mailing Address 1505 W. 5650 N.

City  
SAINT GEORGE

State  
UT

Zip Code  
84770-5929

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151590**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOWELL, MELVIN, E., MR.,**

Mailing Address 1505 W. 5650 N.

City  
SAINT GEORGE

State  
UT

Zip Code  
84770-5929

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159387**

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)..... ►

495.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOYD, JOHN, , MR.,

Mailing Address 507 FALL CREEK RD.

City  
KERRVILLE

State  
TX

Zip Code  
78028-8080

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICA CORP

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160495

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUDWIG, CAROLYN, , MS.,

Mailing Address 5104 AUBURNDALE AVE

City  
COLLEYVILLE

State  
TX

Zip Code  
76034-5199

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 M / D D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143174

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUE, PETER, F., MR.,

Mailing Address 7245 NW 43RD ST

City  
MIAMI

State  
FL

Zip Code  
33166-6401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SST INTERNATIONAL INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145602

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

605.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUNT, DAVID, , MR.,

Mailing Address 30 W. WILDFLOWER DR.

City  
SANTA FE

State  
NM

Zip Code  
87506-0102

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16140995

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUTZ, DAVID, , MR.,

Mailing Address 1223 DICKINSON DR.

City  
CARLISLE

State  
PA

Zip Code  
17013-4221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASTER SOLUTIONS

Occupation (for Individual)  
PRES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153857

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUTZ, JAMES, D., DR.,

Mailing Address 1440 85 TH AVE NORTH

City  
ST. PETERSBURG

State  
FL

Zip Code  
33702-2826

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149984

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYDON, ANDREA, M., ,

Mailing Address 30902 COLONIAL PLACE

City  
LAGUNA NIGUELState  
CAZip Code  
92677-2433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141011

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYLE, GERI, H., MRS.,

Mailing Address 1924 WHISPERWOOD WAY

City  
PORT ORANGEState  
FLZip Code  
32128-6661FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160295

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYLE, GERI, H., MRS.,

Mailing Address 1924 WHISPERWOOD WAY

City  
PORT ORANGEState  
FLZip Code  
32128-6661FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160788

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LYNKEY, GREG, , ,**

Mailing Address 2943 SYCAMORE ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22305-2524

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASSOCIATION OF AIR MEDICAL SERVICES

Occupation (for Individual)  
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138297**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LYONS, LISBETH, , MS.,**

Mailing Address 1210 R ST NW #206

City  
WASHINGTON

State  
DC

Zip Code  
20009-4345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRINTING INDUSTRIES OF AMERICA

Occupation (for Individual)  
LOBBYING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

**Transaction ID : SA11.16144159**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LYONS, LORAIN, , ,**

Mailing Address 4111 FLOYD ST

City  
HOUSTON

State  
TX

Zip Code  
77007-5723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FMA ALLIANCE

Occupation (for Individual)  
GENERAL COUNSEL

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  
03 / 08 / 2016

**Transaction ID : SA11.16139366**

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAATSCH, OTTO, W., MR.,**

Mailing Address 84 GARFIELD ST

City  
DUMONT

State  
NJ

Zip Code  
07628-1306

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151606**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACEY, GLENN, D., MR.,**

Mailing Address 8136 E. CORTEZ DR.

City

SCOTTSDALE

State

AZ

Zip Code

85260-5653

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155824**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MACKAY, ROBERT, J., MR.,**

Mailing Address 530 MALCOLM RD, NW

City

VIENNA

State

VA

Zip Code

22180-4123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ECONOMIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160534**

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MACKINNON, JEFFREY, , ,**

Mailing Address 1634 I ST NW  
STE 1200

City  
WASHINGTON

State  
DC

Zip Code  
20006-4011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARRAGUT PARTNERS

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159023**

Amount of Each Receipt this Period

7500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MADDOX, ROBERT, LEE, MR.,**

Mailing Address 13731 HICKMAN RD APT 3407

City

URBANDALE

State

IA

Zip Code

50323-2199

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  
03 / 21 / 2016

**Transaction ID : SA11.16150292**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MADDOX, ROBERT, LEE, MR.,**

Mailing Address 13731 HICKMAN RD APT 3407

City

URBANDALE

State

IA

Zip Code

50323-2199

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  
03 / 31 / 2016

**Transaction ID : SA11.16163611**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 923

(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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MADISON, WILLIAM, FLOYD, MR.,**

Mailing Address 4015 OAK GROVE CT

City  
SUGAR LANDState  
TXZip Code  
77479-2424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ENERGY CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2016

Transaction ID : SA11.16147754

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAGERS, W., BRYAN, MR.,**

Mailing Address 2342 E. FRITTS LANE

City  
SPRINGFIELDState  
MOZip Code  
65804-3312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRYAN PROPERTIESOccupation (for Individual)  
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

Transaction ID : SA11.16160808

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAKINSON, DONALD, W., MR.,**

Mailing Address 325 ARAPAHO E

City  
SHERMANState  
TXZip Code  
75092-7605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

Transaction ID : SA11.16150737

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

10320.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAKRIS, GEORGE, A., MR., JR.**

Mailing Address 900 WEST 46TH STREET  
SUITE 7

City  
PINE BLUFF

State  
AR

Zip Code  
71603-7164

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SIMMONS FIRST NATIONAL CORP.

Occupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169759**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALLON, THOMAS, J., MR.,**

Mailing Address 609 WOODRIDGE CIRCLE, P.O. BOX 578

City  
INCLINE VILLAGE

State  
NV

Zip Code  
89450-5783

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REGENT SURGICAL HEALTH

Occupation (for Individual)  
BUSINESS ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162403**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MALONEY, COLLEEN, , ,**

Mailing Address 1215 N ST NW #3

City  
WASHINGTON

State  
DC

Zip Code  
20005-5113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
FEDERAL ADVOCACY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148764**

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)..... ►

3750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANDEL, JESSICA, , ,**

Mailing Address 1526 17TH STREET NW, SUITE 406

City  
WASHINGTON

State  
DC

Zip Code  
20036-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CREDIT-SUISSE

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146661**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANEELY, CARL, , MR.,**

Mailing Address 41 S SECOND AVE

City  
MCRAE-HELENA

State  
GA

Zip Code  
31055-4658

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11.16144103**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MANEE, MONTE, S., MR.,**

Mailing Address 6 FENIMORE RD

City  
SCARSDALE

State  
NY

Zip Code  
10583-1606

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  
03 / 14 / 2016

**Transaction ID : SA11.16145131**

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANIX, ROSE, MARIE, MS.,

Mailing Address 7765 W FORESTHILL LN APT 1A

City  
PALOS HEIGHTS

State  
IL

Zip Code  
60463-3014

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 ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149693

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANORANJAN, RANJAN, , ,

Mailing Address 3935 TARRINGTON LANE

City  
COLUMBUS

State  
OH

Zip Code  
43220-2299

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRIME AE

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158957

Amount of Each Receipt this Period

5001.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANOS, WILLIAM, P., MR.,

Mailing Address 661 CAREY HILL ROAD

City  
MONTROUSVILLE

State  
PA

Zip Code  
17754-8508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUTO DEALER

Occupation (for Individual)  
FAIRFIELD AUTO GROUP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149124

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

6601.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAPLES, JAMES, CECIL, MR.,**

Mailing Address 1515 W 17TH ST S

City  
NEWTONState  
IAZip Code  
50208-5600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16161856**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARIN, DAVID, L., MR.,**

Mailing Address 12201 HOUNDS LANE

City  
RESTONState  
VAZip Code  
20191-2616FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PODESTA GROUPOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2016

**Transaction ID : SA11.16139093**

Amount of Each Receipt this Period

770.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARKS, HELEN, E., ,**

Mailing Address 1805 SOUTH BALSAM STREET APT 264

City  
LAKEWOODState  
COZip Code  
80232-6669FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

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
03	/	25	/	2016

**Transaction ID : SA11.16155121**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

1080.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARSHALL, C. TRAVIS, , ,**

Mailing Address 9707 OLD 'GEORGETOWN ROAD  
2606

City  
BETHESDA

State  
MD

Zip Code  
20814-1745

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  
03 / 31 / 2016

**Transaction ID : SA11.16162081**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, EDWARD, , MR.,**

Mailing Address 17 WOODLAND DR.

City  
GROTON

State  
CT

Zip Code  
06340-4128

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137403**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTIN, EDWARD, S., MR.,**

Mailing Address 1046 WOODBERRY RD

City  
NEW KENSINGTON

State  
PA

Zip Code  
15068-5308

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 ▼

820.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158798**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

461.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 923

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, EDWARD, S., MR.,**

Mailing Address 1046 WOODBERRY RD

City  
NEW KENSINGTONState  
PAZip Code  
15068-5308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

**Transaction ID : SA11.16158801**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, JOSEPHINE, C., MS.,**

Mailing Address 1815 N. HIGHLAND STREET

City  
ARLINGTONState  
VAZip Code  
22201-5128FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMAOccupation (for Individual)  
EXECUTIVE VICE PRESIDENT PUBLI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

**Transaction ID : SA11.16155664**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTORANA, SUSAN, , ,**

Mailing Address 6054 CRICKET DRIVE

City  
LAKELANDState  
FLZip Code  
33813-3769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16161634**

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).....▶

1360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MASON, JULIA, O., MS.,**

Mailing Address 1011 FELTL CT APT 724

City  
HOPKINS

State  
MN

Zip Code  
55343-3911

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 / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141251**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MASTERS, RONALD, , MR.,**

Mailing Address 18050 SATURN LANE SUITE 200  
SUITE 200

City  
HOUSTON

State  
TX

Zip Code  
77058-4502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAXIMGROUP

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148735**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATHER, MICHAEL, , ,**

Mailing Address 1764 FAVERSHAM WAY

City  
WOODBIDGE

State  
VA

Zip Code  
22192-2372

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CASTALIA SYSTEMS LLC

Occupation (for Individual)  
IT CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137773**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHER, MICHAEL, , ,**

Mailing Address 1764 FAVERSHAM WAY

City  
WOODBIDGE

State  
VA

Zip Code  
22192-2372

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CASTALIA SYSTEMS LLC

Occupation (for Individual)  
IT CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137774**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTESON, KAREN S, , ,**

Mailing Address 1102 FLEETWOOD PLAZA

City  
LAUREL PARK

State  
NC

Zip Code  
28739-8304

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  
03 / 24 / 2016

**Transaction ID : SA11.16153145**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MATTISON, THOMAS, , DR.,**

Mailing Address 4106 86TH ST

City  
LUBBOCK

State  
TX

Zip Code  
79423-2914

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146247**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAUZ, HENRY, H., MR., JR.**

Mailing Address 1608 VISCAINO RD

City  
PEBBLE BEACH

State  
CA

Zip Code  
93953-3303

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149835**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAXWELL, TAYLOR, , ,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERS

State  
FL

Zip Code  
33908-6308

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147439**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAXWELL, TAYLOR, , ,**

Mailing Address 9121 SOUTHMONT CV206

City  
FORT MYERS

State  
FL

Zip Code  
33908-6308

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152417**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAY, MICHAEL, , MR.,**

Mailing Address 603 CROSS ST

City  
BOYLSTONState  
MAZip Code  
01505-1418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
03	28	2016

**Transaction ID : SA11.16157268**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCALDUFF, PAUL, , ,**

Mailing Address 1301SW2ND ST

City  
POMPANO BEACHState  
FLZip Code  
33069-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ROADWAYTIRE

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16142831**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCALDUFF, PAUL, , ,**

Mailing Address 1301SW2ND ST

City  
POMPANO BEACHState  
FLZip Code  
33069-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ROADWAYTIRE

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M	D D	Y Y Y Y
03	29	2016

**Transaction ID : SA11.16158565**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

460.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCBRIDE, LOREN, , ,**

Mailing Address 420 2ND. AVE N

City  
MYRTLE BEACH

State  
SC

Zip Code  
29575-3841

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156836**

Amount of Each Receipt this Period

115.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCANN, PETER, A., MR.,**

Mailing Address P.O. BOX 416

City  
GROVEPORT

State  
OH

Zip Code  
43125-0416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
R E DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160610**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCARRON, SUZANNE, , MRS.,**

Mailing Address 6446 ABERDEEN AVE.

City  
DALLAS

State  
TX

Zip Code  
75230-5106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXONMOBIL

Occupation (for Individual)  
PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148329**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCONNELL, EDWIN, , ,**

Mailing Address PO DRAWER 16508

City  
MOBILE

State  
AL

Zip Code  
36616-0508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDWIN (EDDIE) MCCONNELL

Occupation (for Individual)  
AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154381**

Amount of Each Receipt this Period

565.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCRAY, GREGORY, C., MR.,**

Mailing Address 9778 MAPLE TRACE CIRCLE

City  
FAIRFAX

State  
VA

Zip Code  
22032-1145

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 ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160580**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCULLOUGH, STEPHEN, , MR.,**

Mailing Address P.O. BOX 222

City  
KENTON

State  
OH

Zip Code  
43326-0222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCCULLOUGH IND.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153833**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

775.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCUNE, JOHN, G., ,**

Mailing Address 7373 E 29TH ST N  
W127

City  
WICHITA

State  
KS

Zip Code  
67226-3405

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160368**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCCURDY, ADELINE, , MS.,**

Mailing Address 3121 FLORIDA AVE N

City

MINNEAPOLIS

State

MN

Zip Code

55427-3025

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  
03 / 30 / 2016

**Transaction ID : SA11.16161497**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCDOWELL, BARBARA, , MS.,**

Mailing Address 265 N. PINE HARBOUR DRIVE

City

COLDSPRING

State

TX

Zip Code

77331-3318

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16148987**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCDOWELL, BARBARA, , MS.,**

Mailing Address 265 N. PINE HARBOUR DRIVE

City  
COLDSPRING

State  
TX

Zip Code  
77331-3318

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154686**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCFEE, WILLIAM, W., MR.,**

Mailing Address 708 MCCORMICK RD

City

WEST LAFAYETTE

State  
IN

Zip Code  
47906-4915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PURDUE UNIV.

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142768**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGEE, ODIS, , ,**

Mailing Address 11321 CR 525

City

MANSFIELD

State  
TX

Zip Code  
76063-7132

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  
03 / 31 / 2016

**Transaction ID : SA11.16162614**

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)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGINLEY, MATT, , ,

Mailing Address 2503-D HARRISON STREET NORTH #1210  
 #1210

City  
 ARLINGTON

State  
 VA

Zip Code  
 22207-1640

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 ADVANCED POLICY CONSULTING

Occupation (for Individual)  
 PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2016

Transaction ID : SA11.16162831

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGOWAN-CARNES, KATHLEEN, , MS.,

Mailing Address 100 EMMEN ROAD

City  
 NEW BERN

State  
 NC

Zip Code  
 28562-9117

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 ROCKTENN

Occupation (for Individual)  
 MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2016

Transaction ID : SA11.16149366

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCIVER, JAMES, , MR.,

Mailing Address 21000 W. ORANGEWOOD AVE.  
 SUITE 180

City  
 ORANGE

State  
 CA

Zip Code  
 92868-

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 FARMERS INSURANCE GROUP

Occupation (for Individual)  
 DISTRICT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2016

Transaction ID : SA11.16141858

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

2850.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKEE, JACK, , MR.,**

Mailing Address 9530 GLYNN DOWNING DRIVE

City  
OOLTEWAH

State  
TN

Zip Code  
37363-8141

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 ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151456**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCLARAN, WILLIAM, K., MR.,**

Mailing Address 3025 PEPPERWOOD DR.

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-3927

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143089**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCLARAN, WILLIAM, K., MR.,**

Mailing Address 3025 PEPPERWOOD DR.

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-3927

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153066**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCLARAN, WILLIAM, K., MR.,**

Mailing Address 3025 PEPPERWOOD DR.

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86404-3927

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160290**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNEIL, ROBERT, D., MR.,**

Mailing Address 301 FIVE POINT ROAD

City  
COATESVILLE

State  
PA

Zip Code  
19320-4925

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENGUIN INDUSTRIES

Occupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152760**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEADE, EDWIN, B., MR.,**

Mailing Address 1500 WESTBROOK CT APT 3144  
APT 3144

City  
RICHMOND

State  
VA

Zip Code  
23227-3373

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 ▼

691.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136731**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEADE, EDWIN, B., MR.,**

Mailing Address 1500 WESTBROOK CT APT 3144  
APT 3144

City  
RICHMOND

State  
VA

Zip Code  
23227-3373

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 ▼

691.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146202**

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEADE, EDWIN, B., MR.,**

Mailing Address 1500 WESTBROOK CT APT 3144  
APT 3144

City  
RICHMOND

State  
VA

Zip Code  
23227-3373

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 ▼

691.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150281**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MEE, CHRISTOPHER, , ,**

Mailing Address 15864 72ND DRIVE N

City  
PALM BEACH GARDENS

State  
FL

Zip Code  
33418-7406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INCAPITAL

Occupation (for Individual)  
FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161703**

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)..... ►

395.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 329 OF 923  
(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEHTA, MUKUL, , ,**

Mailing Address 2202 GREENCEDAR DRIVE

City  
BEL AIRState  
MDZip Code  
21015-6379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M	D D	Y Y Y Y
03	24	2016

**Transaction ID : SA11.16153354**

Amount of Each Receipt this Period

1001.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEIER, GERALD, T., ,**

Mailing Address 23821 ADDISON PL CT

City  
BONITA SPRINGSState  
FLZip Code  
34134-4912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
03	16	2016

**Transaction ID : SA11.16147816**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERCER, ANGUS, W., MR.,**

Mailing Address 4500 CARMEL ESTATES RD

City  
CHARLOTTEState  
NCZip Code  
28226-3417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16142383**

Amount of Each Receipt this Period

2.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

1103.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERCER, ANGUS, W., MR.,**

Mailing Address 4500 CARMEL ESTATES RD

City  
CHARLOTTE

State  
NC

Zip Code  
28226-3417

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142386**

Amount of Each Receipt this Period

3.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERCER, ANGUS, W., MR.,**

Mailing Address 4500 CARMEL ESTATES RD

City  
CHARLOTTE

State  
NC

Zip Code  
28226-3417

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147164**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERRITT, WILLIAM, , MR.,**

Mailing Address 3009 NATHANIELS GREEN

City  
WILLIAMSBURG

State  
VA

Zip Code  
23185-7505

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 ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147322**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

168.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERRITT, WILLIAM, , MR.,**

Mailing Address 3009 NATHANIELS GREEN

City  
WILLIAMSBURG

State  
VA

Zip Code  
23185-7505

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 ▼

289.00

Date of Receipt

**03 / 16 / 2016**

**Transaction ID : SA11.16147324**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERRITT, WILLIAM, , MR.,**

Mailing Address 3009 NATHANIELS GREEN

City  
WILLIAMSBURG

State  
VA

Zip Code  
23185-7505

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 ▼

289.00

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16159964**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. METHENY, HUGH, W., ,**

Mailing Address 1601 RABBIT FOOT CLOVER COURT

City  
ANNAPOLIS

State  
MD

Zip Code  
21401-6488

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GOOD & ASSOCIATES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03 / 24 / 2016**

**Transaction ID : SA11.16155655**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEYER, JIMMY, C., MR.,**

Mailing Address 8103 ROLLING KNOLL CT

City  
SPRINGFIELD

State  
VA

Zip Code  
22153-2530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN

Occupation (for Individual)  
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150288**

Amount of Each Receipt this Period

450.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MICEK, ERNEST, S., MR.,**

Mailing Address 30850 OLD MILL RD

City  
LA CRESCENT

State  
MN

Zip Code  
55947-4200

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 ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161373**

Amount of Each Receipt this Period

505.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MICHAELS, ANITA, , ,**

Mailing Address 425 WORTH AVE  
APT 5E

City  
PALM BEACH

State  
FL

Zip Code  
33480-6525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145632**

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)..... ►

1205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MICKOW, ALLEN, GENE, MR.,**

Mailing Address 4035 BAFFIN LN. NE

City  
ROCHESTER

State  
MN

Zip Code  
55906-3919

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 / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150752**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER JONES, CATHERINE, K., MRS,**

Mailing Address 517 N. HAINES ST.

City  
BOISE

State  
ID

Zip Code  
83712-8014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16160814**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, DOUGLAS, , MR.,**

Mailing Address 212 BELLE SPRINGS RD.

City  
MILL HALL

State  
PA

Zip Code  
17751-9265

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRAL PA AUTO AUCTION

Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169756**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, ELIZABETH, , ,

Mailing Address 897 E NORTHFIELD BLVD

City

MURFREESBORO

State

TN

Zip Code

37130-1246

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158450

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, ELIZABETH, M., MRS.,

Mailing Address 9789 NE MURDEN COVE DR.

City

BAINBRIDGE ISLAND

State

WA

Zip Code

98110-1332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16144563

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, JOHN, C., MR.,

Mailing Address 107 CLUBHOUSE DRIVE  
258

City

NAPLES

State

FL

Zip Code

34105-2940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143032

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

550.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 335 OF 923

(check only one)

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JOY R, ,**

Mailing Address 2327 PELHAM AVE

City  
LOS ANGELES

State  
CA

Zip Code  
90064-2211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

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  
03 / 24 / 2016

**Transaction ID : SA11.16153827**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RAYMOND, L.,**

Mailing Address 3373 FLUVANNA TOWNLINE RD.

City  
JAMESTOWN

State  
NY

Zip Code  
14701-9011

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137363**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RAYMOND, L.,**

Mailing Address 3373 FLUVANNA TOWNLINE RD.

City  
JAMESTOWN

State  
NY

Zip Code  
14701-9011

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153553**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, RAYMOND, L., ,**

Mailing Address 3373 FLUVANNA TOWNLINE RD.

City  
JAMESTOWN

State  
NY

Zip Code  
14701-9011

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154737**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, RAYMOND, L., ,**

Mailing Address 3373 FLUVANNA TOWNLINE RD.

City  
JAMESTOWN

State  
NY

Zip Code  
14701-9011

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155680**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, RICK, , ,**

Mailing Address 2248 ALSCOT AVE

City  
SIMI VALLEY

State  
CA

Zip Code  
93063-3810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHITE MEMORIAL MEDICAL CENTER

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160710**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILTON, CHRISTIAN, , MR.,**

Mailing Address 303 INGEBOG RD

City  
WYNNEWOOD

State  
PA

Zip Code  
19096-3410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

**03 / 01 / 2016**

**Transaction ID : SA11.16136355**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILTON, CHRISTIAN, , MR.,**

Mailing Address 303 INGEBOG RD

City  
WYNNEWOOD

State  
PA

Zip Code  
19096-3410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

**03 / 02 / 2016**

**Transaction ID : SA11.16137123**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIRAGLIA, JULIAN, , ,**

Mailing Address 1170 ST. ANDREWS ROAD

City  
BRYN MAWR

State  
PA

Zip Code  
19010-1951

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 ▼

500.00

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16158206**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

901.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MITCHELL, BARBARA, I., MS.,**

Mailing Address 5577 BRIDGEPORT CIRCLE

City  
LIVERMORE

State  
CA

Zip Code  
94551-5601

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139204**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MITCHELL, BARBARA, I., MS.,**

Mailing Address 5577 BRIDGEPORT CIRCLE

City  
LIVERMORE

State  
CA

Zip Code  
94551-5601

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155679**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MITCHELL, PAUL, , , III**

Mailing Address 1760 GLENCAIRN DRIVE

City  
SAGINAW

State  
MI

Zip Code  
48609-9214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MITCHELL ENTERPRISES

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155081**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MITCHELL, ROBERT, D., DR.,

Mailing Address 11761 ALMOND CT

City  
LOMA LINDA

State  
CA

Zip Code  
92354-3640

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147633

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIXSON, WAYNE, , GOVERNOR,

Mailing Address 2219 DEMERON RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32308-0943

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  
03 / 31 / 2016

Transaction ID : SA11.16163840

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOCKER, JOHN, , ,

Mailing Address 969 RIVA RIDGE CT

City  
UNION

State  
KY

Zip Code  
41091-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LB INDUSTRIES

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158281

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOFFET, LAVANDA, S., MS.,

Mailing Address 6520 LA POZA COURT

City

CITRUS HEIGHTS

State

CA

Zip Code

95621-4363

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

Transaction ID : SA11.16144780

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOFFET, LAVANDA, S., MS.,

Mailing Address 6520 LA POZA COURT

City

CITRUS HEIGHTS

State

CA

Zip Code

95621-4363

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

Transaction ID : SA11.16144781

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOFFET, LAVANDA, S., MS.,

Mailing Address 6520 LA POZA COURT

City

CITRUS HEIGHTS

State

CA

Zip Code

95621-4363

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160519

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

215.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOFFET, LAVANDA, S., MS.,**

Mailing Address 6520 LA POZA COURT

City

CITRUS HEIGHTS

State

CA

Zip Code

95621-4363

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160520**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOFFETT, TONY, , DR.,**

Mailing Address 2510 MILLER WOODS COURT

City

VALRICO

State

FL

Zip Code

33594-3819

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141026**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOFFETT, TONY, , DR.,**

Mailing Address 2510 MILLER WOODS COURT

City

VALRICO

State

FL

Zip Code

33594-3819

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146702**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOGG, JEFFREY, , ,**

Mailing Address 8979 MORGAN CT

City  
NAPLES

State  
FL

Zip Code  
34113-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MOGG ENERGY & ENGINEERING SERVICES

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160763**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTGOMERY, EDWIN, J., MR., JR.**

Mailing Address 17840 NEW LONDON ROAD

City  
MONUMENT

State  
CO

Zip Code  
80132-8523

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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150108**

Amount of Each Receipt this Period

202.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOODY, HENRY, , MR.,**

Mailing Address 14802 QUAKING ASPEN DR.

City  
TOMBALL

State  
TX

Zip Code  
77377-3895

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 ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16144431**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

377.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOODY, HENRY, , MR.,**

Mailing Address 14802 QUAKING ASPEN DR.

City  
TOMBALL

State  
TX

Zip Code  
77377-3895

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 ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156699**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOON, CARA, , ,**

Mailing Address 6010 21ST ST NORTH

City  
ARLINGTON

State  
VA

Zip Code  
22205-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
FEDERAL AFFAIRS

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  
03 / 16 / 2016

**Transaction ID : SA11.16147336**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOONEY, JOHN, K., MR.,**

Mailing Address 980 PLEASANT HILL RD

City  
REDWOOD CITY

State  
CA

Zip Code  
94061-1131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139917**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOONEY, JOHN, K., MR.,

Mailing Address 980 PLEASANT HILL RD

City  
REDWOOD CITY

State  
CA

Zip Code  
94061-1131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16149162

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOONEY, JOHN, K., MR.,

Mailing Address 980 PLEASANT HILL RD

City  
REDWOOD CITY

State  
CA

Zip Code  
94061-1131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16156883

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, DONNA, M., MRS.,

Mailing Address 7000 SW 130TH AVENUE

City  
BEAVERTON

State  
OR

Zip Code  
97008-5116

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 ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149839

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

240.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, GEORGE, R., MR.,**

Mailing Address 30 HOLIDAY DR.  
UNIT 106

City  
DOVER

State  
NH

Zip Code  
03820-9417

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156779**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, TIFFANY, , MS.,**

Mailing Address 417 QUACKENBOS STREET, NW

City

WASHINGTON

State

DC

Zip Code

20011-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONSUMER TECHNOLOGY ASSOCIATION

Occupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152393**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOORE, WILLIAM, W., MR.,**

Mailing Address 11980 TURTLE BEACH ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408-2937

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155618**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORAN, DONALD, W., MR.,**

Mailing Address 858 CENTRILLION DRIVE

City  
MCLEAN

State  
VA

Zip Code  
22102-1446

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE MORAN COMPANY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149113**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORAN, GENE, , ,**

Mailing Address 7904 HERITAGE GRAND PLACE

City

BRADENTON

State  
FL

Zip Code  
34212-3262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPITOL INTEGRATION

Occupation (for Individual)  
LOBBYIST / ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141821**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORAN, RICHARD, , MR.,**

Mailing Address 618 PARKVIEW DR.

City

STEAMBOAT SPRINGS

State  
CO

Zip Code  
80487-3132

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16173749**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 347 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORGAN, HERBERT, N., ,**

Mailing Address 3450 N VENICE ST

City  
ARLINGTON

State  
VA

Zip Code  
22207-4447

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146271**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORGAN, TOM, , ,**

Mailing Address 19226 66TH AVE SOUTH L-108  
STE L108

City  
KENT

State  
WA

Zip Code  
98032-2121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORGNA PARTNERS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160748**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRA, ELIZABETH, A., MS.,**

Mailing Address 6219 POINDEXTER LANE

City  
ROCKVILLE

State  
MD

Zip Code  
20852-3642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PODESTA GROUP

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143206**

Amount of Each Receipt this Period

770.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

970.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORTON, RICHARD, A., MR.,

Mailing Address 108 TALAVERA PLACE

City  
PALM BEACH GARDENS

State  
FL

Zip Code  
33418-6221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149078

Amount of Each Receipt this Period

275.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , MR.,

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159194

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , MR.,

Mailing Address 8228 PINOSITAS RD

City  
WHITTIER

State  
CA

Zip Code  
90605-1330

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159195

Amount of Each Receipt this Period

110.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

495.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUIR, ROBERT, E., MR.,

Mailing Address 522 WEDGWOOD TER.

City  
 GERMANTOWN HILLS

State  
 IL

Zip Code  
 61548-9062

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  
 03 / 10 / 2016

Transaction ID : SA11.16143245

Amount of Each Receipt this Period

30.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUIR, ROBERT, E., MR.,

Mailing Address 522 WEDGWOOD TER.

City  
 GERMANTOWN HILLS

State  
 IL

Zip Code  
 61548-9062

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  
 03 / 18 / 2016

Transaction ID : SA11.16148689

Amount of Each Receipt this Period

10.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUIR, ROBERT, E., MR.,

Mailing Address 522 WEDGWOOD TER.

City  
 GERMANTOWN HILLS

State  
 IL

Zip Code  
 61548-9062

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  
 03 / 29 / 2016

Transaction ID : SA11.16159397

Amount of Each Receipt this Period

30.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

70.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULLINS, BIRCH, , ,

Mailing Address 201 SOUTH WARSON

City  
ST LOUISState  
MOZip Code  
63124-1207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAUR PROPERTIESOccupation (for Individual)  
REAL ESTATE

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  
03 / 30 / 2016

Transaction ID : SA11.16160400

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUNRO, JOSEPH, , MR.,

Mailing Address 4816 SUMMERSET DR.

City  
RAPID CITYState  
SDZip Code  
57702-9243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150165

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUNRO, JOSEPH, , MR.,

Mailing Address 4816 SUMMERSET DR.

City  
RAPID CITYState  
SDZip Code  
57702-9243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16156547

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 351 OF 923  
(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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURPHY, PAT, K., MR.,**

Mailing Address W267 N2899 WOODLAND DR.

City

PEWAUKEE

State

WI

Zip Code

53072-4474

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

HEALTH CARE

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
03	29	2016

**Transaction ID : SA11.16158492**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURRAY, SHANNON, N., MS.,**

Mailing Address 5134 SHOREGATE DRIVE

City

GARLAND

State

TX

Zip Code

75043-4234

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

MEDICAL CITY DALLAS, LTD

Occupation (for Individual)

PBX OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
03	08	2016

**Transaction ID : SA11.16139281**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MYERS, JAMES, L., ,**

Mailing Address 95 QUARTER LANDING

City

ANNAPOLIS

State

MD

Zip Code

21403-2334

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

JAMES L. MYERS ESQ,LLC

Occupation (for Individual)

SEMI-RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M	D D	Y Y Y Y
03	13	2016

**Transaction ID : SA11.16144763**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶

530.00

**TOTAL** This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MYERS, JAMES, L., ,

Mailing Address 95 QUARTER LANDING

City  
ANNAPOLISState  
MDZip Code  
21403-2334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES L. MYERS ESQ,LLCOccupation (for Individual)  
SEMI-RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148671

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, JAMES, L., ,

Mailing Address 95 QUARTER LANDING

City  
ANNAPOLISState  
MDZip Code  
21403-2334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES L. MYERS ESQ,LLCOccupation (for Individual)  
SEMI-RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149490

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, JAMES, L., ,

Mailing Address 95 QUARTER LANDING

City  
ANNAPOLISState  
MDZip Code  
21403-2334FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES L. MYERS ESQ,LLCOccupation (for Individual)  
SEMI-RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16153012

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

70.00

TOTAL This Period (last page this line number only)..... ▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 353 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MYERS, JAMES, L., ,**

Mailing Address 95 QUARTER LANDING

City  
ANNAPOLIS

State  
MD

Zip Code  
21403-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES L. MYERS ESQ,LLC

Occupation (for Individual)  
SEMI-RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161668**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MYERS, JAMES, L., ,**

Mailing Address 95 QUARTER LANDING

City  
ANNAPOLIS

State  
MD

Zip Code  
21403-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES L. MYERS ESQ,LLC

Occupation (for Individual)  
SEMI-RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161673**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MYERS, JERALD, , ,**

Mailing Address 1021 AVONDALE CIR

City  
LAS CRUCES

State  
NM

Zip Code  
88005-1251

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 ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145306**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MYERS, TERYE, , ,

Mailing Address 5200 MARTEL AVE  
 14A

City  
 DALLAS

State  
 TX

Zip Code  
 75206-5657

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SELF-EMPLOYED

Occupation (for Individual)  
 SALES

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  
 03 / 29 / 2016

Transaction ID : SA11.16158903

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAJARIAN, MARY, A., MRS.,

Mailing Address 463 SUMMIT ST

City

ENGLEWOOD CLIFFS

State

NJ

Zip Code

07632-1715

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 ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

Transaction ID : SA11.16146464

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NAMAN, SOLOMON, D., MR.,

Mailing Address 15220 SO. BROADWAY

City

GARDENA

State

CA

Zip Code

90248-1824

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 MECHANICAL METAL FINISHING CO. INC.

Occupation (for Individual)  
 CORP, PRES.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

Transaction ID : SA11.16138142

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

425.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NATELLE, JOAN, F., MRS.,**

Mailing Address 105 WOODFIELD DR

City  
MIDDLEBURY

State  
CT

Zip Code  
06762-

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  
03 / 25 / 2016

**Transaction ID : SA11.16155233**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEIL, KELLY, J., ,**

Mailing Address 114 INEZ PLACE

City  
MILL VALLEY

State  
CA

Zip Code  
94941-2411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 26 / 2016

**Transaction ID : SA11.16154874**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, FREDERICK, , ,**

Mailing Address 74 FULLER POND RD

City  
MIDDLETON

State  
MA

Zip Code  
01949-2508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161125**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEUMAYR, MARY, B., MS.,

Mailing Address 5055 MINDA CT

City

ALEXANDRIA

State

VA

Zip Code

22304-7772

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

U.S. HOUSE OF REPRESENTATIVES

Occupation (for Individual)

ATTORNEY

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157637

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEUMANN, MARC, M., MR.,

Mailing Address 438 UPLAND RD.

City

MEDINA

State

WA

Zip Code

98039-5321

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NOT EMPLOYED

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

411.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

Transaction ID : SA11.16148992

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEVARIL, CHARLES, , ,

Mailing Address 377 JULI FE DR.

City

NAPLES

State

FL

Zip Code

34110-1123

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146663

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

410.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVARIL, CHARLES, , ,**

Mailing Address 377 JULI FE DR.

City  
NAPLES

State  
FL

Zip Code  
34110-1123

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146712**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEVARIL, CHARLES, , ,**

Mailing Address 377 JULI FE DR.

City  
NAPLES

State  
FL

Zip Code  
34110-1123

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160789**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWBY, RICK, , MR.,**

Mailing Address 4300 ADAMS RD.

City  
NORMAN

State  
OK

Zip Code  
73069-1007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE

Occupation (for Individual)  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138404**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

535.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, CHUONG, , ,**

Mailing Address 17603 COMORO

City  
SPRING

State  
TX

Zip Code  
77379-4604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KELSEY

Occupation (for Individual)  
HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154915**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, TRANG, VAN, MR.,**

Mailing Address 2514 DAVIDSON AVE

City  
BRONX

State  
NY

Zip Code  
10468-4262

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 ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140838**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, TRANG, VAN, MR.,**

Mailing Address 2514 DAVIDSON AVE

City  
BRONX

State  
NY

Zip Code  
10468-4262

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 ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153995**

Amount of Each Receipt this Period

90.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICHOLSON, DAVID, A., MR.,

Mailing Address 1 MARTIN PLACE

City

GROSSE POINTE FARMS

State

MI

Zip Code

48230-1950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PVS CHEMICALS

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16169753

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICHOLSON, PAUL, C., MR., JR.

Mailing Address 288 BLACKSTONE BLVD

City

PROVIDENCE

State

RI

Zip Code

02906-4864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16136579

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLSON, SANDRA, J., ,

Mailing Address 3738 EAST 64TH PLACE

City

TULSA

State

OK

Zip Code

74136-1517

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147783

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

3150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICHOLS, SUSAN, , MRS.,

Mailing Address 2612 QUARTER LANE

City  
HAMPTON COVE

State  
AL

Zip Code  
35763-8677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155663

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICK, HARRY, H., MR.,

Mailing Address 521 SENECA RD

City  
GREAT FALLS

State  
VA

Zip Code  
22066-1116

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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16147163

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICKEL, EVELYN, , ,

Mailing Address 6525 NE PORT DR.

City  
LINCOLN CITY

State  
OR

Zip Code  
97367-9448

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 ▼

502.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16140872

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5600.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICKEL, EVELYN, , ,**

Mailing Address 6525 NE PORT DR.

City  
LINCOLN CITY

State  
OR

Zip Code  
97367-9448

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 ▼

502.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151048**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICKEL, JAMES, L., MR.,**

Mailing Address P.O. BOX 60679

City  
BAKERSFIELD

State  
CA

Zip Code  
93386-0679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NICKEL FAMILY LLC

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149389**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICKEL, JAMES, L., MR.,**

Mailing Address 8651 RANCHERIA RD

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-9502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NICKEL FAMILY LLC

Occupation (for Individual)

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154654**

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)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NICOLAI, FRANK, , ,**

Mailing Address 12325 HATTON POINT ROAD

City  
FORT WASHINGTON

State  
MD

Zip Code  
20744-7014

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161930**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICOLL, SHARON, R., MS.,**

Mailing Address 7703 VERNA WAY

City  
LUCERNE

State  
CA

Zip Code  
95458-8593

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16148804**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICOLL, SHARON, R., MS.,**

Mailing Address 7703 VERNA WAY

City  
LUCERNE

State  
CA

Zip Code  
95458-8593

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16148905**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NIX, GARY, , MR.,**

Mailing Address **BOX 607**

City  
**MTN. VIEW**

State  
**WY**

Zip Code  
**82939-0607**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF-EMPLOYED**

Occupation (for Individual)  
**CONSTRUCTION**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16158665**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOBLE, ROBERT, E., ,**

Mailing Address **4932 WILDWOOD DR.**

City  
**OCEANSIDE**

State  
**CA**

Zip Code  
**92057-6929**

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 ▼

**275.00**

Date of Receipt

**03 / 08 / 2016**

**Transaction ID : SA11.16141754**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOBLE, ROBERT, E., ,**

Mailing Address **4932 WILDWOOD DR.**

City  
**OCEANSIDE**

State  
**CA**

Zip Code  
**92057-6929**

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 ▼

**275.00**

Date of Receipt

**03 / 25 / 2016**

**Transaction ID : SA11.16154678**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**400.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOLAN, JAMES, , ,**

Mailing Address 8900 INDIAN CREEK PARKWAY

City

OVERLAND PARK

State

KS

Zip Code

66210-1554

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

THE NOLAN COMPANY

Occupation (for Individual)

CHAIRMAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

**Transaction ID : SA11.16159719**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOLAN, RONALD, , MR.,**

Mailing Address 25910 SPING VALLEY RD

City

LOUISBURG

State

KS

Zip Code

66053-8227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

REAL ESTATE INVESTMENTS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

**Transaction ID : SA11.16139067**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City

MILWAUKEE

State

WI

Zip Code

53207-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

W.B. BOTTLE SUPPLY CO.

Occupation (for Individual)

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

**Transaction ID : SA11.16138122**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

5520.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139172

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143813

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146536

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

**Transaction ID : SA11.16146706**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

**Transaction ID : SA11.16148221**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEEState  
WIZip Code  
53207-4405FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

**Transaction ID : SA11.16148606**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEE

State  
WI

Zip Code  
53207-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162288**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOLTE, REBECCA, , MS.,**

Mailing Address 4103 S BURRELL ST.

City  
MILWAUKEE

State  
WI

Zip Code  
53207-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
W.B. BOTTLE SUPPLY CO.

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163719**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORCROSS, STEPHEN, G., MR.,**

Mailing Address 2531 E EDGAR

City  
FRESNO

State  
CA

Zip Code  
93706-5410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRUIT FILLINGS INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16149015**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORCROSS, STEPHEN, G., MR.,**

Mailing Address 2531 E EDGAR

City  
FRESNO

State  
CA

Zip Code  
93706-5410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRUIT FILLINGS INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16149016**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORDLING, NEAL, J., MR.,**

Mailing Address 7477 115TH STREET NORTH

City

WHITE BEAR LAKE

State

MN

Zip Code

55110-6186

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MULTIFEEDER TECHNOLOGY

Occupation (for Individual)  
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153193**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NORTON, JAMES, H., MRS.,**

Mailing Address 131 PIQUA CIRCLE

City

BERWYN

State

PA

Zip Code

19312-2072

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136119**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

501.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NORTON, JAMES, H., MRS.,**

Mailing Address 131 PIQUA CIRCLE

City  
BERWYNState  
PAZip Code  
19312-2072FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M	D D	Y Y Y Y
03	28	2016

**Transaction ID : SA11.16157117**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NUTTER, ZOE, DELL, MS.,**

Mailing Address 986 TREBEIN ROAD

City  
XENIAState  
OHZip Code  
45385-9534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M	D D	Y Y Y Y
03	15	2016

**Transaction ID : SA11.16148250**

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'BERRY, CARL, G., MR.,**

Mailing Address 10159 N 119TH PLACE

City  
SCOTTSDALEState  
AZZip Code  
85259-5075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M	D D	Y Y Y Y
03	07	2016

**Transaction ID : SA11.16139258**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

25450.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'BERRY, CARL, G., MR.,

Mailing Address 10159 N 119TH PLACE

City  
SCOTTSDALEState  
AZZip Code  
85259-5075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158628

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, JOHN, , MR.,

Mailing Address 13 DOWNER DR.

City  
HAMPTONState  
NHZip Code  
03842-1552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 05 / 2016

Transaction ID : SA11.16138168

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, JOHN, , MR.,

Mailing Address 13 DOWNER DR.

City  
HAMPTONState  
NHZip Code  
03842-1552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 17 / 2016

Transaction ID : SA11.16147980

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

160.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'DONNELL, JOHN, , MR.,**

Mailing Address 13 DOWNER DR.

City  
HAMPTON

State  
NH

Zip Code  
03842-1552

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  
03 / 25 / 2016

**Transaction ID : SA11.16154636**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'DONNELL, JOHN, , MR.,**

Mailing Address 13 DOWNER DR.

City  
HAMPTON

State  
NH

Zip Code  
03842-1552

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  
03 / 30 / 2016

**Transaction ID : SA11.16160508**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'NEAL, JOHN, , ,**

Mailing Address 502 MASTERS DRIVE

City  
PAWLEYS ISLAND

State  
SC

Zip Code  
29585-8284

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145217**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

201.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBERLIN, ROLAND, V., ,**

Mailing Address 5404 HOLLY ST

City  
BELLAIRE

State  
TX

Zip Code  
77401-4704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOCIETE GENERALE

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156792**

Amount of Each Receipt this Period

720.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBMA, BOB, , ,**

Mailing Address 2600 BEAUMONT

City  
GREEN BAY

State  
WI

Zip Code  
54301-2928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137008**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBRIEN, MICHAEL, , ,**

Mailing Address 3700 WOODBINE STREET

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-4955

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PWC

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138290**

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)..... ►

1070.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OBRIEN, PATRICIA, , MS.,**

Mailing Address 535 E 86TH ST

City  
NEW YORK

State  
NY

Zip Code  
10028-7533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149701

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBROKTA, THOMAS, J., MR., JR.**

Mailing Address 6001 PINNACLE VIEW DRIVE

City  
HURRICANE

State  
WV

Zip Code  
25526-7431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BRICKSTREET

Occupation (for Individual)

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16149115

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ODELL, JOHN, , ,**

Mailing Address 3442 AMMA RD

City  
AMMA

State  
WV

Zip Code  
25005-9540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GENERAL PIPELINE CONSTRUCTION INC.

Occupation (for Individual)

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141255

Amount of Each Receipt this Period

180.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1480.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OHLENDORF, RAY, R., MR.,

Mailing Address 4046 NC HWY 16N

City  
TAYLORSVILLEState  
NCZip Code  
28681-8438FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLERGYOccupation (for Individual)  
CLERGY

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  
 03 / 08 / 2016

Transaction ID : SA11.16141635

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLAFSON, WILFRED, A., MR.,

Mailing Address 7765 N SOUTHMOOR CIR

City  
RENOState  
NVZip Code  
89502-9614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2016

Transaction ID : SA11.16138073

Amount of Each Receipt this Period

55.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLAFSON, WILFRED, A., MR.,

Mailing Address 7765 N SOUTHMOOR CIR

City  
RENOState  
NVZip Code  
89502-9614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

Transaction ID : SA11.16156705

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

340.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLEYAR, MARGUERITE, C., MRS.,

Mailing Address 41780 BUTTERFIELD STAGE RD

City  
TEMECULAState  
CAZip Code  
92592-9206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142470

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLLEMAN, ROGER, D., MR.,

Mailing Address 9121 N BURR AVE APT 225

City  
PORTLANDState  
ORZip Code  
97203-2473FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142187

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLSZEWSKI, JOHN, V., ,

Mailing Address 291 KENDAL DR.

City  
KENNETT SQState  
PAZip Code  
19348-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160443

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OMEARA, WILLIAM, , ,**

Mailing Address 138 MOORINGS PARK DR. # 501

City  
NAPLES

State  
FL

Zip Code  
34105-2499

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159583**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ONEIL, JOHN, J., ,**

Mailing Address 1534 STATE ROUTE 12

City  
BINGHAMTON

State  
NY

Zip Code  
13901-5505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MR ROOTER PLUMBING

Occupation (for Individual)  
MAINTENANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139589**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ONEIL, JOHN, J., ,**

Mailing Address 1534 STATE ROUTE 12

City  
BINGHAMTON

State  
NY

Zip Code  
13901-5505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MR ROOTER PLUMBING

Occupation (for Individual)  
MAINTENANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151309**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

215.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ORCE, KENNETH, , ,

Mailing Address 22 HEARTHSTONE CIRCLE

City  
SCARSDALE

State  
NY

Zip Code  
10583-1202

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162017

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTERLIND, PHILIP, R., MR.,

Mailing Address 24 67TH PLACE

City  
LONG BEACH

State  
CA

Zip Code  
90803-4515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

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  
03 / 18 / 2016

Transaction ID : SA11.16148709

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSWALD, JOEL, G., MR.,

Mailing Address 5212 POMMERROY DR

City  
FAIRFAX

State  
VA

Zip Code  
22032-3919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WILLIAMS & JENSEN

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16152494

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OTELLINI, PAUL, S., MR.,**

Mailing Address 2559 GREEN STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94123-4628

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 ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139382**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PACK, TONY, , ,**

Mailing Address 6618 NORTH EAST LOOP 820

City  
NORTH RICHLAND HILLS

State  
TX

Zip Code  
76180-7844

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAM PACK AUTO GROUP

Occupation (for Individual)  
AUTOMOTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138118**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PACK, TONY, , ,**

Mailing Address 6618 NORTH EAST LOOP 820

City  
NORTH RICHLAND HILLS

State  
TX

Zip Code  
76180-7844

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAM PACK AUTO GROUP

Occupation (for Individual)  
AUTOMOTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160485**

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)..... ►

10500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAGANINI, KAREN, , MS.,**

Mailing Address 8863 ROBIN LN

City  
KIRTLAND

State  
OH

Zip Code  
44094-9768

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

K&D

Occupation (for Individual)

PROPERTY DEVELOPMENT & MANA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149376**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAGE, GREGORY, R., MR.,**

Mailing Address 512 HARRINGTON ROAD

City  
WAYZATA

State  
MN

Zip Code  
55391-1513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARGILL INC.

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16144902**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAGIN, JOHN, A., MR.,**

Mailing Address 104 WAYNE ST

City  
HOWE

State  
IN

Zip Code  
46746-9788

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 ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159886**

Amount of Each Receipt this Period

501.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5751.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAHLISCH, DENNIS, L., MR.,**

Mailing Address 210 SW WILSON AVE , #100

City  
**BEND**

State  
**OR**

Zip Code  
**97702-3591**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**PAHLISCH HOMES INC**

Occupation (for Individual)  
**BUILDER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16159505**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAPE, WILLIAM, J., MR., II**

Mailing Address 218 OLD SHERMAN HILL RD

City

**WOODBURY**

State

**CT**

Zip Code

**06798-3914**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**AMERICAN-REPUBLICAN,INC**

Occupation (for Individual)  
**PUBLISHER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2000.00**

Date of Receipt

**03 / 07 / 2016**

**Transaction ID : SA11.16139719**

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PARKER, DAVID, A., MR.,**

Mailing Address 200 E MOTTS CREEK RD

City

**ABSECON**

State

**NJ**

Zip Code

**08205-9634**

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 ▼

**251.00**

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA11.16144446**

Amount of Each Receipt this Period

**1.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**2101.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKER, REED, , ,**

Mailing Address 2500 INDIGO LN  
UNIT 256

City  
GLENVIEW

State  
IL

Zip Code  
60026-8304

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16164029**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PARKS, MARTHA, , MS.,**

Mailing Address 2815 SIMONDALE DR.

City  
FORT WORTH

State  
TX

Zip Code  
76109-1255

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143939**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PASLEY, BARRY, , ,**

Mailing Address 1530 LEONARD ROAD

City  
SHREVEPORT

State  
LA

Zip Code  
71115-8574

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IMA

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138102**

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)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PATRICK, JOHN, EDWARD, MR.,

Mailing Address 11804 BRIDGE ST

City  
FRISCOState  
TXZip Code  
75035-6375FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROCKWELL AUTOMATIONOccupation (for Individual)  
PRODUCT SPECIALIST MCC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16154227

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PATTIE, EMMA, S., ,

Mailing Address 2404 RAYMOND PL

City  
HAYMARKETState  
VAZip Code  
20169-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142016

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTIE, EMMA, S., ,

Mailing Address 2404 RAYMOND PL

City  
HAYMARKETState  
VAZip Code  
20169-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16147162

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULSON, ROBERT, L., MR.,**

Mailing Address 2133 W. 235TH PLACE

City  
TORRANCE

State  
CA

Zip Code  
90501-6045

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139031**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULSON, ROBERT, L., MR.,**

Mailing Address 2133 W. 235TH PLACE

City  
TORRANCE

State  
CA

Zip Code  
90501-6045

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153627**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, ROBERT, L., MR.,**

Mailing Address 2133 W. 235TH PLACE

City  
TORRANCE

State  
CA

Zip Code  
90501-6045

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153628**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAULSON, ROBERT, L., MR.,**

Mailing Address 2133 W. 235TH PLACE

City  
TORRANCE

State  
CA

Zip Code  
90501-6045

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158275**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PAULSON, ROBERT, L., MR.,**

Mailing Address 2133 W. 235TH PLACE

City  
TORRANCE

State  
CA

Zip Code  
90501-6045

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160738**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARCE, BERTHA, DAVIS, MRS.,**

Mailing Address 17 RIDGECREST DRIVE

City  
EASTABOGA

State  
AL

Zip Code  
36260-5457

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 ▼

794.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142151**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEARCE, BERTHA, DAVIS, MRS.,**

Mailing Address 17 RIDGECREST DRIVE

City  
EASTABOGA

State  
AL

Zip Code  
36260-5457

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 ▼

794.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142349**

Amount of Each Receipt this Period

33.50

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARCE, BERTHA, DAVIS, MRS.,**

Mailing Address 17 RIDGECREST DRIVE

City  
EASTABOGA

State  
AL

Zip Code  
36260-5457

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 ▼

794.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150860**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARCE, BERTHA, DAVIS, MRS.,**

Mailing Address 17 RIDGECREST DRIVE

City  
EASTABOGA

State  
AL

Zip Code  
36260-5457

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 ▼

794.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156767**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

313.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEARCE, BERTHA, DAVIS, MRS.,**

Mailing Address 17 RIDGECREST DRIVE

City  
EASTABOGA

State  
AL

Zip Code  
36260-5457

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 ▼

794.50

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163737**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARCE, VIVIAN, , ,**

Mailing Address 4141 N. VIA NUEVA

City  
TUCSON

State  
AZ

Zip Code  
85750-1837

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  
03 / 29 / 2016

**Transaction ID : SA11.16158935**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PECORA, WILLIAM, P., MR.,**

Mailing Address 10123 KINGSBURY LANE

City  
NORTH HUNTINGDON

State  
PA

Zip Code  
15642-8905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SMALL BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155659**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2390.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PECSAR, JEFFREY, , ,**

Mailing Address 2163 LIMA LOOP, PMB 1-468

City  
LAREDOState  
TXZip Code  
78045-6420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16142921**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEED, RHONDA, L., MRS.,**

Mailing Address PO BOX 82545

City  
LINCOLNState  
NEZip Code  
68501-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SANDHILLS PUBLISHINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M	D D	Y Y Y Y
03	15	2016

**Transaction ID : SA11.16148253**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEED, THOMAS, J., MR,**

Mailing Address P.O. BOX 82545

City  
LINCOLNState  
NEZip Code  
68501-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SANDHILLS PUBLISHINGOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M	D D	Y Y Y Y
03	15	2016

**Transaction ID : SA11.16148259**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

67050.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENCE, NANCY, E., MS.,**

Mailing Address 43959 FENNER AVE

City  
LANCASTER

State  
CA

Zip Code  
93536-5808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RE/MAX ALL PRO

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154578**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PENCE, PEGGY, , MRS.,**

Mailing Address 3524 WOOLMAN DR.

City  
HAYMARKET

State  
VA

Zip Code  
20169-1821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141485**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERELMAN, RONALD, O., MR.,**

Mailing Address 35 E. 62ND STREET

City  
NEW YORK

State  
NY

Zip Code  
10065-8014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MACANDREWS & FORBES HOLDINGS

Occupation (for Individual)  
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16152488**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERETTI, BONITA, , ,**

Mailing Address 3303 SUNRIDGE COURT

City  
PARK CITY

State  
UT

Zip Code  
84060-8800

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152959**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERILLO, JOSEPH, , MR.,**

Mailing Address 347 WATER FRONT DR.

City  
WILKESBORO

State  
NC

Zip Code  
28697-8428

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152449**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERKINS, GILMAN, , MR.,**

Mailing Address 99 GOVERNORS LN

City  
FAIRFIELD

State  
CT

Zip Code  
06824-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COBBLESTONE CAPITAL ADVISORS

Occupation (for Individual)  
SALES AND MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155623**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRON, JAY, , ,**

Mailing Address 1441 CONSTITUTION AVE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-6421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AHIP

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138273**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRY, ADDIE, M., MS.,**

Mailing Address 865 OLD DALTON RD NE

City  
ROME

State  
GA

Zip Code  
30165-9096

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 ▼

421.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146144**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRYMAN, GLENDA, NELL, MS.,**

Mailing Address 2 BLALOCK WOODS ST

City  
HOUSTON

State  
TX

Zip Code  
77024-5101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INTERIOR DESIGN

Occupation (for Individual)

INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138709**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

705.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERRY, MICHAEL, D., MR.,**

Mailing Address 5549 W. GROVE COURT

City  
VISALIA

State  
CA

Zip Code  
93291-7926

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAN JOAQUIN VALLEY COLLEGE

Occupation (for Individual)  
EDUCATION ADMINISTRATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155649**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PESQUEIRA, RALPH, , , JR.**

Mailing Address 3695 INDIA ST.

City  
SAN DIEGO

State  
CA

Zip Code  
92103-4749

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145938**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETERSON, BRIAN, , ,**

Mailing Address 1400 LARKSPUR DR.

City  
WOODBURY

State  
MN

Zip Code  
55129-4810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHERXL WELCH

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169745**

Amount of Each Receipt this Period

333.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2938.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETERSON, BRUCE, , MR.,

Mailing Address 928 SO HIGH ST

City  
DENVERState  
COZip Code  
80209-4551FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIO GRANDE COOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149385

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERS, JAY, L., MR.,

Mailing Address 3811 DARWIN RD

City  
DURHAMState  
NCZip Code  
27707-5307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DURHAM TECH COMMUNITY COLLEGEOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153379

Amount of Each Receipt this Period

247.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERSON, JOEL, T., MR.,

Mailing Address 1025 W 5000 S

City  
SPANISH FORKState  
UTZip Code  
84660-5142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PETERSEN PAINTING INC.Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16163749

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

847.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIEPER, BERNARD, , ,**

Mailing Address 402 W FRIAR TUCK LN.

City  
HOUSTON

State  
TX

Zip Code  
77024-5710

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140057**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PIRNIE, TOM, , MR.,**

Mailing Address PO BOX 2122

City  
GRAND ISLAND

State  
NE

Zip Code  
68802-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRAND ISLAND EXPRESS

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16137851**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLANTE, RONALD, L., MR.,**

Mailing Address 1012 LAKEWOOD DR. N

City  
SAINT PAUL

State  
MN

Zip Code  
55119-3608

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152564**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

770.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PLANTE, RONALD, L., MR.,

Mailing Address 1012 LAKEWOOD DR. N

City  
SAINT PAUL

State  
MN

Zip Code  
55119-3608

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152618

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PLAYER, GRACE, , MRS.,

Mailing Address 426 LILLY RD NE

City  
OLYMPIA

State  
WA

Zip Code  
98506-5105

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 / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16156904

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PLAYTIS, ANN, , MS.,

Mailing Address 15 ETON CT

City  
WASHINGTON

State  
WV

Zip Code  
26181-9521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146243

Amount of Each Receipt this Period

120.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

595.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POARCH, EDDIE, , ,**

Mailing Address 2112 SW 67TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73159-2928

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138760**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POARCH, EDDIE, , ,**

Mailing Address 2112 SW 67TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73159-2928

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142106**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POARCH, EDDIE, , ,**

Mailing Address 2112 SW 67TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73159-2928

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151939**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POGODZINSKI, ANTHONY, E., MR.,**

Mailing Address 9609 MANITOU PK DR.

City  
MINOCQUA

State  
WI

Zip Code  
54548-9362

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  
03 / 10 / 2016

**Transaction ID : SA11.16143202**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POGODZINSKI, ANTHONY, E., MR.,**

Mailing Address 9609 MANITOU PK DR.

City  
MINOCQUA

State  
WI

Zip Code  
54548-9362

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  
03 / 24 / 2016

**Transaction ID : SA11.16153127**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POKORNY, GEROLD, E., ,**

Mailing Address 1046 E BUENA VISTA DR.

City  
TEMPE

State  
AZ

Zip Code  
85284-2402

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146727**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POKORNY, GEROLD, E., ,

Mailing Address 1046 E BUENA VISTA DR.

City  
TEMPEState  
AZZip Code  
85284-2402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154822

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POKORNY, GEROLD, E., ,

Mailing Address 1046 E BUENA VISTA DR.

City  
TEMPEState  
AZZip Code  
85284-2402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154823

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POKORNY, GEROLD, E., ,

Mailing Address 1046 E BUENA VISTA DR.

City  
TEMPEState  
AZZip Code  
85284-2402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157801

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POLAK, ERIN, , ,**

Mailing Address 7316 UNIVERSITY AVE

City  
GLEN ECHO

State  
MD

Zip Code  
20812-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCK

Occupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139302**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POOLE, SHARON, T., MR.,**

Mailing Address 18 LENOX RD

City  
SUMMIT

State  
NJ

Zip Code  
07901-3733

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147540**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, RANDALL, , MR.,**

Mailing Address 6729 N. DESERT HILLS ROAD

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253-4214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE MEDICAL MEMORY

Occupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158298**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORTER, SCOTT, D., MR.,**

Mailing Address 203 STRATTON WAY

City  
DECATUR

State  
IN

Zip Code  
46733-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORMULA BOATS

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149497**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PORTER, SHERRON, HAROLD, ,**

Mailing Address 585 E 120 S

City  
SMITHFIELD

State  
UT

Zip Code  
84335-1201

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146558**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PORTER, SHERRON, HAROLD, ,**

Mailing Address 585 E 120 S

City  
SMITHFIELD

State  
UT

Zip Code  
84335-1201

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146562**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POTTER, DENNIS, , ,**

Mailing Address 1601 K ST. NW

City  
WASHINGTON

State  
DC

Zip Code  
20006-1682

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
K & L GATES

Occupation (for Individual)  
GOVERNMENT AFFAIRS ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138219**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POWERS, JOHN, , ,**

Mailing Address 75 EMERALD CIRCLE

City  
VALLEJO

State  
CA

Zip Code  
94589-2737

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141755**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRIMROSE, MICHAEL, A., MR.,**

Mailing Address 12008 IRISH MIST RD. NE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87122-3151

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHAMROCK FOOD COMPANY

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138409**

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

651.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRIMROSE, MICHAEL, A., MR.,**

Mailing Address 12008 IRISH MIST RD. NE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87122-3151

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHAMROCK FOOD COMPANY

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155559**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRITCHARD, WILLIAM, C., ,**

Mailing Address 10901 176TH CIR NE

City  
REDMOND

State  
WA

Zip Code  
98052-7218

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139972**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRITZKER, JENNIFER, N., ,**

Mailing Address 104 SOUTH MICHIGAN AVENUE  
500

City  
CHICAGO

State  
IL

Zip Code  
60603-5902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAWANI ENTERPRISES INC

Occupation (for Individual)  
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16148639**

Amount of Each Receipt this Period

33.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

233.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PROFILI, RON, , MR.,**

Mailing Address 33 OLD COACH ROAD

City  
NAPA

State  
CA

Zip Code  
94558-3858

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  
03 / 29 / 2016

**Transaction ID : SA11.16158676**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PROSCHOLD, PETER, M., MS.,**

Mailing Address 1978 CUNNINGHAM CT.

City

GRAND JUNCTION

State

CO

Zip Code

81507-9561

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138983**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PROSCHOLD, PETER, M., MS.,**

Mailing Address 1978 CUNNINGHAM CT.

City

GRAND JUNCTION

State

CO

Zip Code

81507-9561

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162351**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRUCHNIC, CAROL, A., MS.,**

Mailing Address 162 LAUREN LANE

City  
JOHNSTOWN

State  
PA

Zip Code  
15905-4805

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162433**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRUCHNIC, CAROL, A., MS.,**

Mailing Address 162 LAUREN LANE

City  
JOHNSTOWN

State  
PA

Zip Code  
15905-4805

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162436**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUCKETT, DIANNE, , ,**

Mailing Address 2797N AIRPORT RD

City  
BEEVILLE

State  
TX

Zip Code  
78102-2741

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REFLEX THERAPIST/NAIL TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154939**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PULLIAM, MORRIS, W., MR.,**

Mailing Address 9485 HUNT CLUB TRAIL NE

City  
WARREN

State  
OH

Zip Code  
44484-1740

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153119**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PULLIAM, MORRIS, W., MR.,**

Mailing Address 9485 HUNT CLUB TRAIL NE

City  
WARREN

State  
OH

Zip Code  
44484-1740

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162841**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PULLMAN, JOHN, , ,**

Mailing Address 2914 MANAGUA PLACE

City  
CARLSBAD

State  
CA

Zip Code  
92009-7105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143461**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 405 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PULLMAN, JOHN, , ,**

Mailing Address 2914 MANAGUA PLACE

City  
CARLSBAD

State  
CA

Zip Code  
92009-7105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**03 / 24 / 2016**

**Transaction ID : SA11.16153669**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PULLMAN, JOHN, , ,**

Mailing Address 2914 MANAGUA PLACE

City  
CARLSBAD

State  
CA

Zip Code  
92009-7105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA11.16158230**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PULLMAN, JOHN, , ,**

Mailing Address 2914 MANAGUA PLACE

City  
CARLSBAD

State  
CA

Zip Code  
92009-7105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**03 / 30 / 2016**

**Transaction ID : SA11.16160562**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PUTNAM, JOSEPH, D., MR.,

Mailing Address 55 MISSION TRAIL RD

City  
WOODSIDEState  
CAZip Code  
94062-3544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUTNAM AUTOMOTIVEOccupation (for Individual)  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159859

Amount of Each Receipt this Period

330.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUART, BARRY, , MR.,

Mailing Address 1350 E FLAMINGO RD  
349City  
LAS VEGASState  
NVZip Code  
89119-5263FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HERON THERAPEUTICSOccupation (for Individual)  
RESEARCH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148005

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RADEMAKER, STEPHEN, , ,

Mailing Address 1620 BROOKSIDE RD.

City  
MCLEANState  
VAZip Code  
22101-3306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PODESTA GROUPOccupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1924.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142814

Amount of Each Receipt this Period

770.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

2100.00

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAFFANIELLO, PATRICK, J., MR.,**

Mailing Address 1161 OLD GATE COURT

City  
MCLEAN

State  
VA

Zip Code  
22102-2532

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149506**

Amount of Each Receipt this Period

11000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAISIAN, JOHN, , ,**

Mailing Address 21190 CANYON OAK WAY

City  
CUPERTINO

State  
CA

Zip Code  
95014-6572

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOOVER INSTITUTION, STANFORD UNIV.

Occupation (for Individual)  
ECONOMIST

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  
03 / 07 / 2016

**Transaction ID : SA11.16139146**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RALPH, JAY, , MR.,**

Mailing Address HANFELDER STRASSE 74

City  
STARNBERG

State  
GE

Zip Code  
82319-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANZ

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169749**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAND, MICHAEL, , ,

Mailing Address 2926 E ADAMS ST

City  
TUCSONState  
AZZip Code  
85716-3536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157147

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RANDALL, TREVOR, , MR.,

Mailing Address 2009 N. KELLY AVE.  
SUITE 100City  
EDMONDState  
OKZip Code  
73003-3910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE GROUPOccupation (for Individual)  
INSURANCE AGENT

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  
03 / 07 / 2016

Transaction ID : SA11.16138406

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANDELS, JAMES, B., MR.,

Mailing Address 1001MAR WALT DR. APT218  
APT 218City  
FT WALTON BEACHState  
FLZip Code  
32547-6746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160791

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

850.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 409 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANFT, DONALD, , ,**

Mailing Address 64 CUPSAW AVE

City  
RINGWOOD

State  
NJ

Zip Code  
07456-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLLEN IP

Occupation (for Individual)  
PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142991**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANFT, DONALD, , ,**

Mailing Address 64 CUPSAW AVE

City  
RINGWOOD

State  
NJ

Zip Code  
07456-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLLEN IP

Occupation (for Individual)  
PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153332**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANFT, DONALD, , ,**

Mailing Address 64 CUPSAW AVE

City  
RINGWOOD

State  
NJ

Zip Code  
07456-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLLEN IP

Occupation (for Individual)  
PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160348**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

155.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RANGOS, JOHN, G., MR., SR.**

Mailing Address 701 OSPREY POINT CIRCLE

City  
BOCA RATON

State  
FL

Zip Code  
33431-5245

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 ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153572**

Amount of Each Receipt this Period

2.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANGOS, JOHN, G., MR., SR.**

Mailing Address 701 OSPREY POINT CIRCLE

City  
BOCA RATON

State  
FL

Zip Code  
33431-5245

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 ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153588**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAO, TANNIRU, R., MR.,**

Mailing Address 14950 DEL PRADO CT

City  
ELM GROVE

State  
WI

Zip Code  
53122-1513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARKET PROBE INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159646**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2602.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAPP, MICHAEL, , MR.,**

Mailing Address 26865 NW SULPHUR SPRINGS ROAD

City  
CORVALLIS

State  
OR

Zip Code  
97330-9350

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HP

Occupation (for Individual)

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135964**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAPP, MICHAEL, , MR.,**

Mailing Address 26865 NW SULPHUR SPRINGS ROAD

City  
CORVALLIS

State  
OR

Zip Code  
97330-9350

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HP

Occupation (for Individual)

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162799**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAYMORE, PETER, K., MR.,**

Mailing Address 4439 TURNBERRY PLACE

City  
NICEVILLE

State  
FL

Zip Code  
32578-3824

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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157077**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REED, DOLORES, ANN, MRS.,**

Mailing Address 4607 PECAN LN

City  
GRANBURY

State  
TX

Zip Code  
76049-8212

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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154255**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, ROBERT, , ,**

Mailing Address 1427 BAY HEAD RD.

City  
ANNAPOLIS

State  
MD

Zip Code  
21409-5708

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 ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147580**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, ROBERT, , ,**

Mailing Address 1427 BAY HEAD RD.

City  
ANNAPOLIS

State  
MD

Zip Code  
21409-5708

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 ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152555**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

345.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REICHERT, WALTER, P., MR.,**

Mailing Address 3907 CHATSWORTH GREENE

City  
SARASOTA

State  
FL

Zip Code  
34235-6852

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152619**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REID, CECIL, , ,**

Mailing Address 160 BODIE AVE

City  
FOREST CITY

State  
NC

Zip Code  
28043-5117

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  
03 / 22 / 2016

**Transaction ID : SA11.16151844**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REILLY, LORI, M., MS.,**

Mailing Address 5576 LA VISTA DRIVE

City  
ALEXANDRIA

State  
VA

Zip Code  
22310-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
EVP, POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153056**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2550.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 414 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REVLING, RICHARD, K., ,

Mailing Address 1971 W VIA DEL PICAMADEROS

City  
GREEN VALLEYState  
AZZip Code  
85622-5413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157139

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, PETER, , MR.,

Mailing Address 3370 STREAMSIDE LANE  
106City  
THOUSAND OAKSState  
CAZip Code  
91360-8421FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162355

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RHYNE, DENNIS, A., DR.,

Mailing Address 24951 SAUSALITO ST

City  
LAGUNA HILLSState  
CAZip Code  
92653-5627FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16149454

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICCA, PETER, M., MR.,**

Mailing Address 523 JORDT CIRCLE  
XXX

City  
ANCHORAGE

State  
AK

Zip Code  
99504-1129

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145890**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICCA, PETER, M., MR.,**

Mailing Address 523 JORDT CIRCLE  
XXX

City  
ANCHORAGE

State  
AK

Zip Code  
99504-1129

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158173**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICCA, PETER, M., MR.,**

Mailing Address 523 JORDT CIRCLE  
XXX

City  
ANCHORAGE

State  
AK

Zip Code  
99504-1129

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158174**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 416 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RICCA, PETER, M., MR.,

Mailing Address 523 JORDT CIRCLE  
XXXCity  
ANCHORAGEState  
AKZip Code  
99504-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158175

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICCIO, CLIFFORD, , ,

Mailing Address 4810 25TH STREET N

City  
ARLINGTONState  
VAZip Code  
22207-2619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NCTAOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162265

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHARDSON, STEVEN, B., MR.,

Mailing Address 88 JAMES AVE

City  
CRANFORDState  
NJZip Code  
07016-2636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLS FARGO ADVISONSOccupation (for Individual)  
CONSULTANT

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  
03 / 24 / 2016

Transaction ID : SA11.16154208

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

5205.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICHTER, ALFRED, , MR.,**

Mailing Address 215 OAK KNOLL DR.

City  
GLENDORA

State  
CA

Zip Code  
91741-3044

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157837**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIETZ, CHARLES, F., MR.,**

Mailing Address 1220 EASTHILL DR.

City  
WAUSAU

State  
WI

Zip Code  
54403-9223

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136699**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIPA, LAWRENCE, , MR., JR.**

Mailing Address 5 TAMMI CT.

City  
KINGS PARK

State  
NY

Zip Code  
11754-5034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAPIR MANAGEMENT CO.

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138858**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIPA, LAWRENCE, , MR., JR.

Mailing Address 5 TAMMI CT.

City  
KINGS PARK

State  
NY

Zip Code  
11754-5034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAPIR MANAGEMENT CO.

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145709

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIPA, LAWRENCE, , MR., JR.

Mailing Address 5 TAMMI CT.

City  
KINGS PARK

State  
NY

Zip Code  
11754-5034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAPIR MANAGEMENT CO.

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153573

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIPA, LAWRENCE, , MR., JR.

Mailing Address 5 TAMMI CT.

City  
KINGS PARK

State  
NY

Zip Code  
11754-5034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KAPIR MANAGEMENT CO.

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157842

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RISTKOK, TUULI, , MRS.,**

Mailing Address 16 W.16 ST.

6JN

City

NEW YORK

State

NY

Zip Code

10011-6328

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138099**

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCH, PHILIP, E., MR.,**

Mailing Address 146 KALUAMOOO ST

City

KAILUA

State

HI

Zip Code

96734-2144

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136667**

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCH, PHILIP, E., MR.,**

Mailing Address 146 KALUAMOOO ST

City

KAILUA

State

HI

Zip Code

96734-2144

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150958**

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RITCH, PHILIP, E., MR.,**

Mailing Address 146 KALUAMOOO ST

City  
KAILUA

State  
HI

Zip Code  
96734-2144

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150959**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCH, PHILIP, E., MR.,**

Mailing Address 146 KALUAMOOO ST

City  
KAILUA

State  
HI

Zip Code  
96734-2144

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150962**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCH, PHILIP, E., MR.,**

Mailing Address 146 KALUAMOOO ST

City  
KAILUA

State  
HI

Zip Code  
96734-2144

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151021**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIVERA, ILIA, , ,

Mailing Address 200 AVE. JESUS T. PINERO  
15E

City  
SAN JUAN

State  
PR

Zip Code  
00918-4157

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137753

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIZZO, LARRY, F., MR.,

Mailing Address 3661 AQUARIUS DR.

City

HUNTINGTON BEACH

State

CA

Zip Code

92649-2504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2016

Transaction ID : SA11.16148995

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, JANICE, , MS.,

Mailing Address 201 AVALON RD

City

COLUMBUS

State

WI

Zip Code

53925-1807

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162476

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, JANICE, , MS.,

Mailing Address 201 AVALON RD

City  
COLUMBUSState  
WIZip Code  
53925-1807FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162477

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, LYNN, , MR.,

Mailing Address 1651 LADERA TRAIL

City  
CENTERVILLEState  
OHZip Code  
45459-1401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KMCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16152376

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, LYNN, , MR.,

Mailing Address 1651 LADERA TRAIL

City  
CENTERVILLEState  
OHZip Code  
45459-1401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KMCOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152412

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 423 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, ARTHUR, R., MR.,

Mailing Address 3202 WESTGATE LN

City  
RICHARDSON

State  
TX

Zip Code  
75082-3114

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  
03 / 31 / 2016

Transaction ID : SA11.16162049

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERT, BARNES, C., MR.,

Mailing Address 213 BENT PINE TRCE

City  
HENDERSONVILLE

State  
NC

Zip Code  
28739-9229

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  
03 / 21 / 2016

Transaction ID : SA11.16151091

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, RICHARD, D., MR.,

Mailing Address 1109 S BAY SHORE DR.

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23451-3807

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146012

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTSON, ROLAND, B., MR.,**

Mailing Address 219 LAKE CIRCLE

City  
MADISON

State  
MS

Zip Code  
39110-7992

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143578**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, RUSSELL, L., MR.,**

Mailing Address 2200 ALAQUA DRIVE

City  
LONGWOOD

State  
FL

Zip Code  
32779-3100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALL ABOARD FLORIDA

Occupation (for Individual)  
VICE PRESIDENT, GOVERNMENT AF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155645**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, STEPHEN, , MR.,**

Mailing Address 1326 MORNINGSIDE DR

City  
CHARLESTON

State  
WV

Zip Code  
25314-1934

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WV CHAMBER OF COMMERCE

Occupation (for Individual)  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155080**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2200.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBINSON, JAMES, P., MRS.,**

Mailing Address 1291 MOUNT VERNON PL

City  
PASADENA

State  
CA

Zip Code  
91103-1971

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137402**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINS, RITA, , MRS.,**

Mailing Address 1615 S CLARK RD

City  
MARKLE

State  
IN

Zip Code  
46770-9072

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139484**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBINS, RITA, , MRS.,**

Mailing Address 1615 S CLARK RD

City  
MARKLE

State  
IN

Zip Code  
46770-9072

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141549**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

301.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBINS, RITA, , MRS.,

Mailing Address 1615 S CLARK RD

City  
MARKLEState  
INZip Code  
46770-9072FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16151757

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROGERS, JON, , MR.,

Mailing Address 1731 AVIATION BLVD  
95648City  
LINCOLNState  
CAZip Code  
95648-9317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROGERS FAMILY CO.Occupation (for Individual)  
MANAGER

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  
03 / 05 / 2016

Transaction ID : SA11.16138213

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROMANELLI, PAUL, , MR.,

Mailing Address 220 S WRIGHT RD

City  
JANESVILLEState  
WIZip Code  
53546-9718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ORTHODONTIST

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  
03 / 31 / 2016

Transaction ID : SA11.16162406

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

355.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROOPER, ANNADALE, , MRS.,

Mailing Address 3722 W 8TH. ST.

City  
THE DALLES

State  
OR

Zip Code  
97058-4434

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 ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145647

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROOPER, ANNADALE, , MRS.,

Mailing Address 3722 W 8TH. ST.

City  
THE DALLES

State  
OR

Zip Code  
97058-4434

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 ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16163309

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROOT, JAMES, W., MR.,

Mailing Address 215 ARMSTRONG DRIVE

City  
GEORGETOWN

State  
TX

Zip Code  
78633-5133

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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16137361

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

620.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROSIER, WILLIAM, , ,**

Mailing Address P O BOX 975

City  
SALADO

State  
TX

Zip Code  
76571-0975

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCLANE COMPANY INC

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158832**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROSS, LOCK, , MR.,**

Mailing Address 18 FOX HALL CLOSE

City  
NASHVILLE

State  
TN

Zip Code  
37215-1861

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150064**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROTH, STEPHEN, , ,**

Mailing Address 4705 LOCUST HILL COURT

City  
BETHESDA

State  
MD

Zip Code  
20814-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUTHERLAND ASBILL & BRENNAN LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143101**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROTH, STEPHEN, , ,**

Mailing Address 4705 LOCUST HILL COURT

City  
BETHESDA

State  
MD

Zip Code  
20814-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUTHERLAND ASBILL & BRENNAN LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153756**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROTH, STEPHEN, , ,**

Mailing Address 4705 LOCUST HILL COURT

City  
BETHESDA

State  
MD

Zip Code  
20814-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUTHERLAND ASBILL & BRENNAN LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159424**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROUX, MARGARET, , MRS.,**

Mailing Address 4845 LEE VALLEY RD

City  
TABERG

State  
NY

Zip Code  
13471-2739

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144210**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

395.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUNNELS, ANN, W., MS.,

Mailing Address P.O. BOX 3661

City  
LUBBOCK

State  
TX

Zip Code  
79452-3661

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WINN JANITORIAL

Occupation (for Individual)  
PART TIME JANITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141143

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUSSELL, THOMAS, H., MR.,

Mailing Address 12607 S 12TH ST

City  
JENKS

State  
OK

Zip Code  
74037-4993

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THOMAS RUSSELL COMPANY

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16151072

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAADA, JOHN, M., MR., SR.

Mailing Address 3775 LANDER RD APT 4  
APT 4

City  
CHAGRIN FALLS

State  
OH

Zip Code  
44022-1384

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145687

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

505.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SABIN, ANDREW, E., MR.,**

Mailing Address 300 PANTIGO PL STE 102

City  
EAST HAMPTON

State  
NY

Zip Code  
11937-2630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SABIN METAL CORPORATION

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160805**

Amount of Each Receipt this Period

8000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SALING, GEORGE, , MR.,**

Mailing Address P.O. BOX 581890

City  
KUSSIMMEE

State  
FL

Zip Code  
34758-0024

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153578**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALING, GEORGE, , MR.,**

Mailing Address P.O. BOX 581890

City  
KUSSIMMEE

State  
FL

Zip Code  
34758-0024

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161724**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SALVOSA, DONN, , ,**

Mailing Address 9911 OAK BRANCH DR.

City  
VIENNAState  
VAZip Code  
22181-5333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DS2, LLC

Occupation (for Individual)

LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	06	/	2016

**Transaction ID : SA11.16138275**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAMSON, SCOTT, JOSEPH, MR.,**

Mailing Address 1833 LOST PINE LN.

City  
APOPKAState  
FLZip Code  
32712-3958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	14	/	2016

**Transaction ID : SA11.16146102**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAMSON, SCOTT, JOSEPH, MR.,**

Mailing Address 1833 LOST PINE LN.

City  
APOPKAState  
FLZip Code  
32712-3958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	21	/	2016

**Transaction ID : SA11.16149926**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDENAW, TOM, A., MR., JR.**

Mailing Address 5900 N JORNADA RD.

City  
LAS CRUCES

State  
NM

Zip Code  
88012-7215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SANDENAW LAW FIRM PC

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160061**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, WILBURN, , ,**

Mailing Address 111 BUFORD HUGHEY RD.

City  
DELLROSE

State  
TN

Zip Code  
38453-5005

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141027**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SANDERS, WILBURN, , ,**

Mailing Address 111 BUFORD HUGHEY RD.

City  
DELLROSE

State  
TN

Zip Code  
38453-5005

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161767**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANFORD, T, H., ,**

Mailing Address 622 ROSARITA DRIVE

City  
FULLERTON

State  
CA

Zip Code  
92835-1841

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16154185**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANNUTO, THOMAS, , , JR.**

Mailing Address 6490 RIVER LODGE LN

City  
WEEKI WACHEE

State  
FL

Zip Code  
34607-4020

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 ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139471**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAPIRO, STEPHEN, , MR.,**

Mailing Address 439 MONTGOMERY ST.

City  
SALINAS

State  
CA

Zip Code  
93907-2041

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  
03 / 29 / 2016

**Transaction ID : SA11.16158465**

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)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SATTERWHITE, ROD, , MR.,**

Mailing Address 500 N LORAIN ST STE 901

City  
MIDLAND

State  
TX

Zip Code  
79701-4752

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STUBBERMAN, MCRAE, SEALY, LAUGHLIN

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145152**

Amount of Each Receipt this Period

71.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAULS, JEFF, , MR.,**

Mailing Address 1801 LA PLAYA WAY

City  
SACRAMENTO

State  
CA

Zip Code  
95864-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE GROUP

Occupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138407**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAVAGE, LILLIAN, T., MS.,**

Mailing Address 3 PURSUIT  
NO 8

City  
ALISO VIEJO

State  
CA

Zip Code  
92656-4213

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145627**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

621.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 436 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAVAGE, LILLIAN, T., MS.,**

Mailing Address 3 PURSUIT

NO 8

City

ALISO VIEJO

State

CA

Zip Code

92656-4213

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16155129**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAWYER, GEORGE, , ,**

Mailing Address 404 NORTH UNION STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SAWYER WEEMS LLC

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153633**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAWYER, GEORGE, , ,**

Mailing Address 404 NORTH UNION STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SAWYER WEEMS LLC

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161658**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCAROLA, MICHAEL, F., MR.,

Mailing Address 23 CLIFFORD CT.

City  
MALVERNE

State  
NY

Zip Code  
11565-1306

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 / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139507

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAEFER, LEAH, E., MRS.,

Mailing Address 9924 WELLINGTON WAY

City  
FORT SMITH

State  
AR

Zip Code  
72908-9059

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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143499

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHAEFER, LEAH, E., MRS.,

Mailing Address 9924 WELLINGTON WAY

City  
FORT SMITH

State  
AR

Zip Code  
72908-9059

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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145775

Amount of Each Receipt this Period

2.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

302.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAEFFNER, MARGARET, N., MS.,**

Mailing Address 2205 2ND ST SW  
APT 439

City  
ROCHESTER

State  
MN

Zip Code  
55902-2465

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149869**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHATKO, JOANN, L., MS.,**

Mailing Address 17810 24 MILE RD

City

MACOMB

State

MI

Zip Code

48042-2907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136368**

Amount of Each Receipt this Period

221.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHECHTER, MRS., EILEEN, ,**

Mailing Address 200 E 61ST ST

City

NEW YORK

State

NY

Zip Code

10065-8550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146425**

Amount of Each Receipt this Period

247.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

573.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHELL, JAMES, M., MR.,**

Mailing Address 1050 FIFTH AVENUE

8D

City

NEW YORK

State

NY

Zip Code

10028-0110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SKADDEN ARPS

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142836**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHELL, JAMES, M., MR.,**

Mailing Address 1050 FIFTH AVENUE

8D

City

NEW YORK

State

NY

Zip Code

10028-0110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SKADDEN ARPS

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160305**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHELL, JOSEPH, , MR.,**

Mailing Address 15004 PRATOLINO WAY

City

NAPLES

State

FL

Zip Code

34110-2717

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162072**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

1210.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHELL, SHERREE, E., MRS.,**

Mailing Address 2000 W. BROADWAY

City  
IDAHO FALLS

State  
ID

Zip Code  
83402-2916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SCHELL DISTRIBUTING INC

Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143208**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHLENDORF, DAVID, , ,**

Mailing Address 6111 FIFTH AVENUE  
302

City  
PITTSBURGH

State  
PA

Zip Code  
15232-2863

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158428**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHLENDORF, DAVID, , ,**

Mailing Address 6111 FIFTH AVENUE  
302

City  
PITTSBURGH

State  
PA

Zip Code  
15232-2863

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158429**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHLECKSER, ROBERT, , MR.,**

Mailing Address 6622 BROOKSHIRE DRIVE

City  
DALLAS

State  
TX

Zip Code  
75230-4158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

EXXON MOBIL

Occupation (for Individual)

VICE PRESIDENT AND TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148331

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHMIDT, ERIC, , ,**

Mailing Address 555 BRYANT STREET  
#347

City  
PALO ALTO

State  
CA

Zip Code  
94301-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ALPHABET

Occupation (for Individual)

EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155782

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHMITTLE, GERALDINE, A., ,**

Mailing Address 33 WOODY KNOLL DR.

City  
THORNVILLE

State  
OH

Zip Code  
43076-8350

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16144656

Amount of Each Receipt this Period

120.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

34520.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, JOAN, F., MS.,

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City  
ISSAQUAHState  
WAZip Code  
98029-6835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148675

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMIDT, JOAN, F., MS.,

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City  
ISSAQUAHState  
WAZip Code  
98029-6835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162237

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, JOAN, F., MS.,

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City  
ISSAQUAHState  
WAZip Code  
98029-6835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162281

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHNEIDER, ROBERT, L., MR.,**

Mailing Address 14392 WILLOW LN

City  
TUSTIN

State  
CA

Zip Code  
92780-2345

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  
03 / 30 / 2016

**Transaction ID : SA11.16160598**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHOCH, ALINE, , ,**

Mailing Address 1227 VISTA BONITA

City

NEW BRAUNFELS

State

TX

Zip Code

78130-1298

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161747**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHREIBER, DAVID, , MR.,**

Mailing Address 3 REGENT DRIVE

City

LAWRENCE

State

NY

Zip Code

11559-1424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154618**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 444 OF 923  
(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUEPPERT, GEORGE, L., MRS.,**

Mailing Address P.O. BOX 467

City  
SISTER BAYState  
WIZip Code  
54234-0467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		19		2016

**Transaction ID : SA11.16148797**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHUEPPERT, GEORGE, L., MRS.,**

Mailing Address P.O. BOX 467

City  
SISTER BAYState  
WIZip Code  
54234-0467FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

**Transaction ID : SA11.16162323**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHULTZ, RUSSELL, D., MR.,**

Mailing Address P.O. BOX 380

City  
MICHIGANTOWNState  
INZip Code  
46057-0380FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

**Transaction ID : SA11.16151560**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

355.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHUMACHER, HARRY, RICHARD, MR., ESQ.**

Mailing Address 47 E 88TH ST

City  
NEW YORKState  
NYZip Code  
10128-1152FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	D D	Y Y Y Y
03	10	2016

**Transaction ID : SA11.16143685**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARTZ, BART, M., MR.,**

Mailing Address P.O. BOX 431, 14 SALEM HILL ROAD

City  
SOUTH SALEMState  
NYZip Code  
10590-0431FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BART SCHWARTZOccupation (for Individual)  
ATTORNEY/BUS EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16142816**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, DAVID, , MR.,**

Mailing Address P.O. BOX 43

City  
WINNSBOROState  
TXZip Code  
75494-0043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M	D D	Y Y Y Y
03	19	2016

**Transaction ID : SA11.16148815**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCROGINS, WILLIAM, C., MR.,**

Mailing Address 2000 CHEROKEE DR.

City

NEPTUNE BEACH

State

FL

Zip Code

32266-1533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SMART PHARMACY

Occupation (for Individual)

CO-OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169757**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEARCY, DARREL, R., ,**

Mailing Address 323 SUNSET CV

City

SUNRISE BEACH

State

MO

Zip Code

65079-7109

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 ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143533**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEARCY, STEPHEN, E., , DDS**

Mailing Address 3839 W CONGRESS SUITE B

City

LAFAYETTE

State

LA

Zip Code

70506-6000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

ORTHODONTIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142213**

Amount of Each Receipt this Period

240.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

33690.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEASTRAND, EDWARD, E., MR.,**

Mailing Address 12 KESWICK LANE

City  
CROSSVILLE

State  
TN

Zip Code  
38558-2880

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16144557**

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEBASTIAN, GAIL, , ,**

Mailing Address 2941 ROCK CREEK RD

City  
NORTH WILKESBORO

State  
NC

Zip Code  
28659-7615

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16140550**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEBASTIAN, GAIL, , ,**

Mailing Address 2941 ROCK CREEK RD

City  
NORTH WILKESBORO

State  
NC

Zip Code  
28659-7615

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148416**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

400.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEBASTIAN, GAIL, , ,**

Mailing Address 2941 ROCK CREEK RD

City  
NORTH WILKESBORO

State  
NC

Zip Code  
28659-7615

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154529**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEBASTIAN, GAIL, , ,**

Mailing Address 2941 ROCK CREEK RD

City  
NORTH WILKESBORO

State  
NC

Zip Code  
28659-7615

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154949**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEIDLER, TERRY, , ,**

Mailing Address 755 MADRE ST

City  
PASADENA

State  
CA

Zip Code  
91107-5662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137497**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 449 OF 923

(check only one)

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SEIFERT, BETTY, ANN, ,**

Mailing Address 189 LEO NELSON RD

City  
YORKTOWN

State  
TX

Zip Code  
78164-3454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151864**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEMLER, JERRY, D., MRS.,**

Mailing Address 8015 HEYWARD DR.

City  
INDIANAPOLIS

State  
IN

Zip Code  
46250-4226

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  
03 / 31 / 2016

**Transaction ID : SA11.16163642**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SESSIONS, JANET, , MS.,**

Mailing Address 121 WOODCREEK DR. E

City  
SAFETY HARBOR

State  
FL

Zip Code  
34695-5513

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143123**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SESSIONS, JANET, , MS.,**

Mailing Address 121 WOODCREEK DR. E

City  
SAFETY HARBOR

State  
FL

Zip Code  
34695-5513

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159190**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHABAY, PAUL, , ,**

Mailing Address 2904 EDGEWOOD LANE

City  
COLLEYVILLE

State  
TX

Zip Code  
76034-5179

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 ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137785**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHABAY, PAUL, , ,**

Mailing Address 2904 EDGEWOOD LANE

City  
COLLEYVILLE

State  
TX

Zip Code  
76034-5179

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 ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154936**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHABAY, PAUL, , ,

Mailing Address 2904 EDGEWOOD LANE

City  
COLLEYVILLE

State  
TX

Zip Code  
76034-5179

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 ▼

496.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162550

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAFFER, RONALD, , ,

Mailing Address 1470 E. MINERAL PL.

City  
CENTENNIAL

State  
CO

Zip Code  
80122-2909

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162781

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEA, PATRICK, C., ,

Mailing Address 353 COSTA MESA ST

City  
COSTA MESA

State  
CA

Zip Code  
92627-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEACON BAY ENTERPRISES INC.

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145537

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

575.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEA, PATRICK, C., ,**

Mailing Address 353 COSTA MESA ST

City  
COSTA MESA

State  
CA

Zip Code  
92627-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEACON BAY ENTERPRISES INC.

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151269**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHILLINGBURG, JOHN, E., MR.,**

Mailing Address 4800 FILLMORE AVE APT 603  
APT 603

City  
ALEXANDRIA

State  
VA

Zip Code  
22311-5057

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139730**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHILLINGBURG, JOHN, E., MR.,**

Mailing Address 4800 FILLMORE AVE APT 603  
APT 603

City  
ALEXANDRIA

State  
VA

Zip Code  
22311-5057

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147078**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

595.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHINE-RING, E., ANN, ,

Mailing Address 22315 SOLO RUNWAY SE

City  
DEMINGState  
NMZip Code  
88030-1847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

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  
03 / 26 / 2016

Transaction ID : SA11.16154885

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHIPLEY, EDWARD, N., MR.,

Mailing Address 43 MCCAMPBELL ROAD

City  
HOLMDELState  
NJZip Code  
07733-2232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153455

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHIPLEY, EDWARD, N., MR.,

Mailing Address 43 MCCAMPBELL ROAD

City  
HOLMDELState  
NJZip Code  
07733-2232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161932

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

195.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHOEMAKER, A., ROSS, MR., JR.

Mailing Address 810 GLENAIRY DR. NE

City  
ATLANTA

State  
GA

Zip Code  
30328-4219

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 ▼

701.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16164063

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHORE, ANDREW, , MR.,

Mailing Address 5904 NORTH 22ND STREET

City  
ARLINGTON

State  
VA

Zip Code  
22205-3327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOCHUM SHORE & TROSSEVIN, PC

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16140998

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHORT, JACK, , ,

Mailing Address 9334 SOUTH INDIANAPOLIS

City  
TULSA

State  
OK

Zip Code  
74137-4853

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  
03 / 31 / 2016

Transaction ID : SA11.16162579

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

850.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHORT, LEN, , ,

Mailing Address 3604 FRESHWATER DRIVE

City  
JUPITERState  
FLZip Code  
33477-5804FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOTLINX, INC.Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146729

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHURTLEFF, ANNEKE, H., ,

Mailing Address 11600 CHALK HILL ROAD

City  
HEALDSBURGState  
CAZip Code  
95448-8034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139968

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIDDOWAY, LYLE, , ,

Mailing Address 1408 CREST WAY

City  
YORKState  
PAZip Code  
17403-9102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLSPAN CARDIOLOGYOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143275

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)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIEGEL, RONALD, D., MR.,

Mailing Address 1063 SURREY WOODS DRIVE

City  
MCMURRAYState  
PAZip Code  
15317-6306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STREELMAN RICHARDS & COMPANYOccupation (for Individual)  
OWNER

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  
03 / 29 / 2016

Transaction ID : SA11.16158781

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SILL, MICHAEL, , ,

Mailing Address 3660 NORTHOME ROAD

City  
DEEPHAVENState  
MNZip Code  
55391-3021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROAD MACHINERY & SUPPLIES CO.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161854

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILVIS, GENE, , ,

Mailing Address 9837 E. 85TH STREET

City  
TULSAState  
OKZip Code  
74133-4521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
FINANCIAL SERVICES SALES

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  
03 / 29 / 2016

Transaction ID : SA11.16158321

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1500.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMPERMAN, ROY, F., MR.,

Mailing Address 5609 80TH AVE SE

City  
MERCER ISLAND

State  
WA

Zip Code  
98040-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TYPESETTER CORP.

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16151946

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKAAR, VIC, B., MR.,

Mailing Address 852 E RUSH CT

City  
NIXA

State  
MO

Zip Code  
65714-7983

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2016

Transaction ID : SA11.16148976

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKAAR, VIC, B., MR.,

Mailing Address 852 E RUSH CT

City  
NIXA

State  
MO

Zip Code  
65714-7983

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159480

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

5150.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SKAGGS, JAMES, , MRS.,**

Mailing Address 3939 BEE CAVE RD  
BLDG C-100

City  
AUSTIN

State  
TX

Zip Code  
78746-6431

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 ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146549**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SKAGGS, JAMES, , MRS.,**

Mailing Address 3939 BEE CAVE RD  
BLDG C-100

City  
AUSTIN

State  
TX

Zip Code  
78746-6431

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 ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162708**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SKAGGS, JAMES, , MRS.,**

Mailing Address 3939 BEE CAVE RD  
BLDG C-100

City  
AUSTIN

State  
TX

Zip Code  
78746-6431

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 ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162710**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

720.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SKAGGS, JOHN, R., MR.,**

Mailing Address 2601 BOWIE ST

City  
AMARILLO

State  
TX

Zip Code  
79109-2109

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 ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138870**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SKAGGS, JOHN, R., MR.,**

Mailing Address 2601 BOWIE ST

City  
AMARILLO

State  
TX

Zip Code  
79109-2109

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 ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142265**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SKIPPER, LAURIE, E., MS.,**

Mailing Address 10288 W DEERWOOD LANE

City  
FRANKLIN

State  
WI

Zip Code  
53132-8124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HARLEY-DAVIDSON MOTOR CO

Occupation (for Individual)  
IT - ENTERPRISE ARCHITECT

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  
03 / 29 / 2016

**Transaction ID : SA11.16159444**

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)..... ►

385.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SLAVIC, EDITH, , ,**

Mailing Address 10308 LA REINA RD

City  
DELRAY BEACH

State  
FL

Zip Code  
33446-2723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149504**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLOAN, NANCY, , ,**

Mailing Address P.O. BOX 727

City  
WALPOLE

State  
NH

Zip Code  
03608-0727

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161579**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMALLWOOD, BRAD, , MR.,**

Mailing Address P.O. BOX 471647

City  
TULSA

State  
OK

Zip Code  
74147-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED SAFETY

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149369**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, CHARLES, , ,**

Mailing Address P O BOX 478

City  
EAST BERLIN

State  
PA

Zip Code  
17316-0478

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  
03 / 10 / 2016

**Transaction ID : SA11.16143363**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, CHARLES, , ,**

Mailing Address P O BOX 478

City  
EAST BERLIN

State  
PA

Zip Code  
17316-0478

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  
03 / 31 / 2016

**Transaction ID : SA11.16162103**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, FREDERICK, , ,**

Mailing Address 77 MEADOW BROOK ROAD

City  
NORWELL

State  
MA

Zip Code  
02061-2729

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148165**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

290.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, GORDON, , MR.,**

Mailing Address 3105 ASHWORTH RD

City  
WEST DES MOINES

State  
IA

Zip Code  
50265-3251

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 ▼

1215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147801**

Amount of Each Receipt this Period

610.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LANCIA, , MS.,**

Mailing Address 1061 EAST 133RD WAY

City  
THORNTON

State  
CO

Zip Code  
80241-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SMITH ENVIRONMENTAL AND ENGINEERING

Occupation (for Individual)  
EXECUTIVE MANAGMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162238**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LANCIA, , MS.,**

Mailing Address 1061 EAST 133RD WAY

City  
THORNTON

State  
CO

Zip Code  
80241-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SMITH ENVIRONMENTAL AND ENGINEERING

Occupation (for Individual)  
EXECUTIVE MANAGMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162240**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

830.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, LAUREN, C., MRS.,**

Mailing Address 420 E SHORELINE DR.

City  
NORTH AUGUSTA

State  
SC

Zip Code  
29841-5457

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DANIEL SMITH, M.D.

Occupation (for Individual)  
OPHTHALMIC TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16164256**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, LINDA, J., MRS.,**

Mailing Address 1900 MONTE SANO BLVD.

City  
HUNTSVILLE

State  
AL

Zip Code  
35801-1170

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16149097**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LOUISE, D., MS.,**

Mailing Address 1116 HOLIDAY DR.

City  
CROSSVILLE

State  
TN

Zip Code  
38555-5825

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151610**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RICHARD, BRAM, MS.,**

Mailing Address 14 BROOK HILLS CIRCLE

City

WHITE PLAINS

State

NY

Zip Code

10605-5004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

LSTA

Occupation (for Individual)

ED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146441**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ROBERT, , ,**

Mailing Address 7 TIMES SQUARE  
28TH FLOOR

City

NEW YORK

State

NY

Zip Code

10036-6516

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FRIEDMAN KAPLAN SEILER & ADELMAN LLP

Occupation (for Individual)

LAWYER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161997**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, WILLIAM, , ,**

Mailing Address 12807 NE 26TH PL

City

BELLEVUE

State

WA

Zip Code

98005-1725

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139128**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

1600.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, WILLIAM, , ,**

Mailing Address 12807 NE 26TH PL

City  
BELLEVUE

State  
WA

Zip Code  
98005-1725

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142984**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, WILLIAM, , ,**

Mailing Address 12807 NE 26TH PL

City  
BELLEVUE

State  
WA

Zip Code  
98005-1725

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154484**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, WILLIAM, , ,**

Mailing Address 12807 NE 26TH PL

City  
BELLEVUE

State  
WA

Zip Code  
98005-1725

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159259**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, WILLIAM, W., MR.,

Mailing Address 1635 73RD AVE NE

City  
MEDINAState  
WAZip Code  
98039-2330FEC 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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145659

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITS, DAN, , ,

Mailing Address 5354 EDGEWOOD DRIVE

City  
MOUNDS VIEWState  
MNZip Code  
55112-1402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OUTSOURCE RECEIVABLES, INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160757

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITS, DAN, , ,

Mailing Address 5354 EDGEWOOD DRIVE

City  
MOUNDS VIEWState  
MNZip Code  
55112-1402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OUTSOURCE RECEIVABLES, INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162873

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMYK, MARY, , MS.,**

Mailing Address 7 BUNKER HILL AVE

City  
STRATHAM

State  
NH

Zip Code  
03885-2404

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145287

Amount of Each Receipt this Period

410.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SNELL, ALICE, W., ,**

Mailing Address 4515 N DROMEDARY RD

City  
PHOENIX

State  
AZ

Zip Code  
85018-2938

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145508

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SNIEGON, GINNY, A., MS.,**

Mailing Address 5901 MT. EAGLE DRIVE #1402

City  
ALEXANDRIA

State  
VA

Zip Code  
22303-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INSTITUTE OF DEFENSE ANALYSES

Occupation (for Individual)  
INSTITUTE OF DEFENSE ANALYSES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155647

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1560.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOPHER, EVELYN, V., ,

Mailing Address 3243 LEPRECHAUN LN

City

PALM HARBOR

State

FL

Zip Code

34683-2325

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159439

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPARKS, STEPHEN, , ,

Mailing Address 36220 JEFFREY DR.

City

STERLING HEIGHTS

State

MI

Zip Code

48310-4357

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142676

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPELLINGS, JAMES, M., MR., JR.

Mailing Address 6623 WAGGONER DRIVE

City

DALLAS

State

TX

Zip Code

75230-5235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

EXXON MOBIL CORPORATION

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16151457

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

5410.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 469 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPELLMAN, JAMES, W., ,**

Mailing Address 2025 E LINCOLN ST

City  
BLOOMINGTONState  
ILZip Code  
61701-5995FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

**Transaction ID : SA11.16152846**

Amount of Each Receipt this Period

265.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STACKHOUSE, WAYNE, ALBERT, ,**

Mailing Address 4817 KENT ST.

City  
ANCHORAGEState  
AKZip Code  
99503-7032FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

**Transaction ID : SA11.16155822**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STADLER, ELIZABETH, B., MS.,**

Mailing Address 314 WALNUT DR.

City  
NASHVILLEState  
TNZip Code  
37205-2916FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

**Transaction ID : SA11.16141383**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

1315.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 470 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAMM, JOHN, R., ,**

Mailing Address 244 BAVARIAN CT

City  
GREEN BAY

State  
WI

Zip Code  
54302-4942

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  
03 / 09 / 2016

**Transaction ID : SA11.16142133**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANTON, MARTHA, , ,**

Mailing Address 22 BURLINGTON ST.

City  
LEXINGTON

State  
MA

Zip Code  
02420-

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157896**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STANTON, MARTHA, , ,**

Mailing Address 22 BURLINGTON ST.

City  
LEXINGTON

State  
MA

Zip Code  
02420-

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158966**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STARKER, B BOND, , ,

Mailing Address 4180 SW BROOKLANE DR.

City  
CORVALLISState  
ORZip Code  
97333-1457FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STARKER FORESTS, INC.Occupation (for Individual)  
FORESTER / EXEC.

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  
03 / 23 / 2016

Transaction ID : SA11.16153023

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STAROSTOVIC, ED, , MR.,

Mailing Address 2620 MARILYN DR.

City  
STOUGHTONState  
WIZip Code  
53589-4147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154843

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STAROSTOVIC, ED, , MR.,

Mailing Address 2620 MARILYN DR.

City  
STOUGHTONState  
WIZip Code  
53589-4147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159041

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).....▶

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 472 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STASHIK, DAVID, H., MR.,

Mailing Address 1507 EDITH STREET

City  
BERKELEY

State  
CA

Zip Code  
94703-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143395

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STASHIK, DAVID, H., MR.,

Mailing Address 1507 EDITH STREET

City  
BERKELEY

State  
CA

Zip Code  
94703-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153732

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STASHIK, DAVID, H., MR.,

Mailing Address 1507 EDITH STREET

City  
BERKELEY

State  
CA

Zip Code  
94703-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158550

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 473 OF 923  
(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STASHIK, DAVID, H., MR.,**

Mailing Address 1507 EDITH STREET

City  
BERKELEYState  
CAZip Code  
94703-1123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
COACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16162071**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEED, JEFFERY, , MR.,**

Mailing Address 6234 COLUMBIA RD

City  
NORTH OLMSTEDState  
OHZip Code  
44070-4619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

**Transaction ID : SA11.16159807**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEFFEK, JOHN, C., DR., M.D.**

Mailing Address 9611 LOUETTA RD

City  
SPRINGState  
TXZip Code  
77379-6550FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN STEFFEK M.D.Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2016

**Transaction ID : SA11.16141083**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

10300.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEIN, AVY, H., MR.,**

Mailing Address 57 MAPLE HILL ROAD

City  
GLENCOE

State  
IL

Zip Code  
60022-1308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WILLIS STEIN & PARTNERS

Occupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151459**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINKAMP, JANET, LEE, ,**

Mailing Address 397 SUNDANCE DR.

City  
HEMPHILL

State  
TX

Zip Code  
75948-6583

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 ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135824**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEINKAMP, JANET, LEE, ,**

Mailing Address 397 SUNDANCE DR.

City  
HEMPHILL

State  
TX

Zip Code  
75948-6583

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 ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137016**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 475 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEINKAMP, JANET, LEE, ,

Mailing Address 397 SUNDANCE DR.

City  
HEMPHILLState  
TXZip Code  
75948-6583FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143038

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEINKAMP, JANET, LEE, ,

Mailing Address 397 SUNDANCE DR.

City  
HEMPHILLState  
TXZip Code  
75948-6583FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2016

Transaction ID : SA11.16154830

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEINKAMP, JANET, LEE, ,

Mailing Address 397 SUNDANCE DR.

City  
HEMPHILLState  
TXZip Code  
75948-6583FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16154931

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STENTZ, JEFFREY, , ,**

Mailing Address 3941 ROARING FORK DR.

City  
LOVELAND

State  
CO

Zip Code  
80538-4847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABC SUPPLY COMPANMY

Occupation (for Individual)  
ACQUISITIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143273**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STERN, DAVID, , ,**

Mailing Address P.O. BOX 1043

City  
DUBOIS

State  
PA

Zip Code  
15801-1043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARIS COMPANIES

Occupation (for Individual)  
PRES & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146667**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STERNE, ROBERT, , ,**

Mailing Address 825 10TH STREET, NW, APARTMENT 479

City  
WASHINGTON

State  
DC

Zip Code  
20001-5083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STERNE, KESSLER, GOLDSTEIN & FOX, PLLC

Occupation (for Individual)  
PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135959**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 477 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STERNE, ROBERT, , ,**

Mailing Address 825 10TH STREET, NW, APARTMENT 479

City  
WASHINGTON

State  
DC

Zip Code  
20001-5083

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

STERNE, KESSLER, GOLDSTEIN & FOX, PLLC

Occupation (for Individual)

PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162795**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENSON, STEVE, , ,**

Mailing Address 18798 DEERE PATH LANE

City

RICHLAND CENTER

State

WI

Zip Code

53581-5866

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146526**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STIRLING, DAVID, , MR.,**

Mailing Address 2449 N 600 W

City

PLEASANT GROVE

State

UT

Zip Code

84062-9253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DOTERRA

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149114**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STOAKS, ALBERT, R., MR.,**

Mailing Address 1840 GRAHAM BLVD

City  
VALE

State  
OR

Zip Code  
97918-5350

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145523**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOKES, ROBERT, G., MR.,**

Mailing Address P.O. BOX 3

City

LAKELAND

State

FL

Zip Code

33802-0003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRAY HARRIS ROBINSON

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152024**

Amount of Each Receipt this Period

220.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STONE, KATHERYNE, F., MS.,**

Mailing Address 6717 LAKE SHORE DRIVE

City

GARLAND

State

TX

Zip Code

75044-2043

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147141**

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)..... ►

770.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STONE, WILLIAM, , MR.,**

Mailing Address 1072 288TH AVE.

City  
**BURLINGTON**

State  
**WI**

Zip Code  
**53105-9304**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF-EMPLOYED**

Occupation (for Individual)  
**APPLE FARMER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA11.16143870**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOOPS, STEVEN, O., MR.,**

Mailing Address 1222 STONECREST DR.

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77018-7414**

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 ▼

**710.00**

Date of Receipt

**03 / 09 / 2016**

**Transaction ID : SA11.16142829**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOOPS, STEVEN, O., MR.,**

Mailing Address 1222 STONECREST DR.

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77018-7414**

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 ▼

**710.00**

Date of Receipt

**03 / 23 / 2016**

**Transaction ID : SA11.16153032**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**160.00**

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOOPS, STEVEN, O., MR.,

Mailing Address 1222 STONECREST DR.

City  
HOUSTONState  
TXZip Code  
77018-7414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153364

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOOPS, STEVEN, O., MR.,

Mailing Address 1222 STONECREST DR.

City  
HOUSTONState  
TXZip Code  
77018-7414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158296

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STOREY, THOMAS, , MR.,

Mailing Address 10101 AUSTRIAN WAY

City  
OAK PARKState  
MIZip Code  
48237-1879FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCA DETROITOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162064

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STORMONT, RICHARD, M., MR.,

Mailing Address 3747 PEACHTREE RD NE STE. 723  
 723

City  
 ATLANTA

State  
 GA

Zip Code  
 30319-1330

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

Transaction ID : SA11.16158184

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOWELL, CHARLIE, F., MR.,

Mailing Address 20562 TIFFANY CIR

City

TEHACHAPI

State

CA

Zip Code

93561-8699

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

ADMIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2016

Transaction ID : SA11.16152292

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRANSKY, JOHN, E., MR.,

Mailing Address 11330 N 59TH ST

City

LONGMONT

State

CO

Zip Code

80503-9158

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

Transaction ID : SA11.16163752

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 482 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRANSKY, JOHN, E., MR.,**

Mailing Address 11330 N 59TH ST

City  
LONGMONT

State  
CO

Zip Code  
80503-9158

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163755**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRASSER, ALLEN, , ,**

Mailing Address 45 HARTFORD LANE

City

BRETTON WOODS

State  
NH

Zip Code  
03575-

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135969**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRASSER, ALLEN, , ,**

Mailing Address 45 HARTFORD LANE

City

BRETTON WOODS

State  
NH

Zip Code  
03575-

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155812**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRASSER, ALLEN, , ,**

Mailing Address 45 HARTFORD LANE

City  
BRETTON WOODS

State  
NH

Zip Code  
03575-

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162793**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRATTON, WILLIAM, C., MR.,**

Mailing Address P.O. BOX 248

City  
AVON BY THE SEA

State  
NJ

Zip Code  
07717-0248

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOVA FINANCIAL CONSULTING

Occupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143481**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STREIGHT, RAYMOND, L., MR.,**

Mailing Address 205 ADONIS CIRCLE

City  
MCKINNEY

State  
TX

Zip Code  
75070-5882

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST SOLUTIONS GROUP, INC.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159638**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 484 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUDBRINK, ROBERT, , ,**

Mailing Address 3100 NE 47TH CR APT 403  
APT 403

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33308-5360

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16136184**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUDBRINK, ROBERT, , ,**

Mailing Address 3100 NE 47TH CR APT 403  
APT 403

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33308-5360

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137996**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUDBRINK, ROBERT, , ,**

Mailing Address 3100 NE 47TH CR APT 403  
APT 403

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33308-5360

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141537**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SUDBRINK, ROBERT, , ,**

Mailing Address 3100 NE 47TH CR APT 403  
APT 403

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33308-5360

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147642**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SUKUP, STEVE, , MR.,**

Mailing Address 1405 NORTH SHORE DRIVE

City  
CLEAR LAKE

State  
IA

Zip Code  
50428-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUKUP MANUFACTURING COMPANY

Occupation (for Individual)  
OWNER

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  
03 / 29 / 2016

**Transaction ID : SA11.16159861**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUMMERS, JEAN, H., ,**

Mailing Address 20832 PACIFIC COAST HIGHWAY

City  
MALIBU

State  
CA

Zip Code  
90265-5216

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  
03 / 29 / 2016

**Transaction ID : SA11.16158752**

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)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 486 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SURLAS, JEFF, , ,

Mailing Address 2004 10TH STREET

City  
MONROEState  
WIZip Code  
53566-1834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLONY BRANDS, INC.Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162726

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUTKOWSKI, ERNEST, H., MR.,

Mailing Address 20 BALDWIN RD.

City  
SADDLE RIVERState  
NJZip Code  
07458-3203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE WESTCHESTER BUS. INSTITUTEOccupation (for Individual)  
CHAIRMAN, BOARD OF TRUSTEES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148249

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUTTON, JAMES, , ,

Mailing Address 143 EAST MAIN STREET

City  
EAST ISLIPState  
NYZip Code  
11730-2601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES F. SUTTON AGENCY LTDOccupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146683

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

10500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWANSON, BARBARA, L., MS.,**

Mailing Address 7724 YORK LN N

City  
BROOKLYN PARK

State  
MN

Zip Code  
55443-2891

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  
03 / 07 / 2016

**Transaction ID : SA11.16139249**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWANSON, SANDRA, K., MS.,**

Mailing Address 4400 S 98TH. ST.

City  
LINCOLN

State  
NE

Zip Code  
68526-9399

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16149284**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWENSON, PETER, , MR.,**

Mailing Address 1341 LODGE LN

City  
BOULDER

State  
CO

Zip Code  
80303-8101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CH2ML

Occupation (for Individual)  
PROJECT MANAGER

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  
03 / 09 / 2016

**Transaction ID : SA11.16140957**

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)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 488 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137751**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137771**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138853**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139329**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143047**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143851**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16143861

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146516

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146720

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148015

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148076

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148164

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148559

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148586

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153081

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

85.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153678**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154541**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

**Transaction ID : SA11.16154922**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2016

Transaction ID : SA11.16154930

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155689

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16155694

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 495 OF 923

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155708**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158866**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160696**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 496 OF 923

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161824**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162030**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SWIRE, JAMES, B., MR.,**

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162359**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, B., MR.,

Mailing Address 4 MILL POND LN

City  
NEW ROCHLLE

State  
NY

Zip Code  
10805-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16162402

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWITZER, SUSAN, , ,

Mailing Address 4350 SENTINEL VW NW

City  
ATLANTA

State  
GA

Zip Code  
30327-3920

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  
03 / 08 / 2016

Transaction ID : SA11.16141398

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAN, LONA, , ,

Mailing Address 6133 W CORRINE DR.

City  
GLENDALE

State  
AZ

Zip Code  
85304-1721

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139457

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

361.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 498 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TASHIJAN, CHARLES, , MR.,**

Mailing Address 56 DARTMOUTH ST

City  
MEDFORD

State  
MA

Zip Code  
02155-5950

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 ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145047**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TASHIJAN, CHARLES, , MR.,**

Mailing Address 56 DARTMOUTH ST

City  
MEDFORD

State  
MA

Zip Code  
02155-5950

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 ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152536**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TATE, DEREK, , ,**

Mailing Address 237 SOMERVELLE ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22304-8610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST AIRLINES

Occupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16174568A**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK \$250.00 ON 03/16/2016

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

580.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TATE, DEREK, , ,

Mailing Address 237 SOMERVELLE ST

City

ALEXANDRIA

State

VA

Zip Code

22304-8610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SOUTHWEST AIRLINES

Occupation (for Individual)

PILOT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16174568B

Amount of Each Receipt this Period

-250.00

☐ Memo Item

CONTRIBUTION

CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAUSCHER, BRIAN, M., MR.,

Mailing Address 40 OAKMONT DR.

City

CONCORD

State

NH

Zip Code

03301-6915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159153

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, HARRY, I., MRS.,

Mailing Address 1953 S. VIEW DR.

City

FORT COLLINS

State

CO

Zip Code

80524-5012

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 / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16148058

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, HARRY, I., MRS.,**

Mailing Address 1953 S. VIEW DR.

City  
FORT COLLINS

State  
CO

Zip Code  
80524-5012

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 / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153386**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, HARRY, I., MRS.,**

Mailing Address 1953 S. VIEW DR.

City  
FORT COLLINS

State  
CO

Zip Code  
80524-5012

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 / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161935**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JEFFREY E., ,**

Mailing Address 8016 SPARTAN DR.

City  
YOUNGSTOWN

State  
OH

Zip Code  
44512-5866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR OF BOARDMAN

Occupation (for Individual)  
SALES

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  
03 / 29 / 2016

**Transaction ID : SA11.16159059**

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)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JEFFREY, E., ,**

Mailing Address 8016 SPARTAN DR.

City  
YOUNGSTOWN

State  
OH

Zip Code  
44512-5866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAYLOR OF BOARDMAN

Occupation (for Individual)  
SALES

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  
03 / 29 / 2016

**Transaction ID : SA11.16159057**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEICHER, LEONARD, , MR.,**

Mailing Address P.O. BOX 5706

City  
SSCOTTSDALE

State  
AZ

Zip Code  
85261-5706

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16138152**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TERRY, RICHARD, E., MR.,**

Mailing Address 431 CREEKSIDE CT

City  
WILLOWBROOK

State  
IL

Zip Code  
60527-5492

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139423**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

501.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TERRY, RICHARD, E., MR.,**

Mailing Address 431 CREEKSIDE CT

City  
WILLOWBROOK

State  
IL

Zip Code  
60527-5492

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16156822**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, DAVID, , MR.,**

Mailing Address 175 SHADY LANE DR.  
APT 212

City  
NORWALK

State  
OH

Zip Code  
44857-2711

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16157878**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMAS, JOHN, T., MR.,**

Mailing Address 7024 WHITE TAIL CT  
TOWER II, SUITE 360

City  
TOLEDO

State  
OH

Zip Code  
43617-1391

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHYSICIANS REALTY TRUST

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159271**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ROBERT, H., MR.,**

Mailing Address 128 CHURCH AVE

City  
SEYMOUR

State  
IN

Zip Code  
47274-3622

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137233**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMAS, ROBERT, H., MR.,**

Mailing Address 128 CHURCH AVE

City  
SEYMOUR

State  
IN

Zip Code  
47274-3622

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16137507**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, CONRAD, O., MR.,**

Mailing Address 901 17TH ST NE

City  
ROCHESTER

State  
MN

Zip Code  
55906-4206

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 ▼

751.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139740**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

601.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, KENNETH, , ,**

Mailing Address 1400 FOOTH9ILL DR.  
343

City  
ANGELS CAMP

State  
CA

Zip Code  
95222-

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  
03 / 24 / 2016

**Transaction ID : SA11.16153124**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, KENNETH, , ,**

Mailing Address 1400 FOOTH9ILL DR.  
343

City  
ANGELS CAMP

State  
CA

Zip Code  
95222-

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  
03 / 27 / 2016

**Transaction ID : SA11.16154934**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, LORI, A., MS.,**

Mailing Address 602 N GUADALUPE AVE  
B

City  
REDONDO BEACH

State  
CA

Zip Code  
90277-2953

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REEDEX, INC.

Occupation (for Individual)  
ACCTG. MGR./CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153474**

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)..... ►

350.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMPSON, NICHOLAS, , MR.,**

Mailing Address 2516 NORTH FLORIDA STREET

City  
ARLINGTON

State  
VA

Zip Code  
22207-1732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RE/DISTRICT

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149126**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMSEN, JOSEPH, , MR.,**

Mailing Address 1153 MIRAMAR ST

City  
LAGUNA BEACH

State  
CA

Zip Code  
92651-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NORTHROP GRUMMAN

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143251**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMSEN, JOSEPH, , MR.,**

Mailing Address 1153 MIRAMAR ST

City  
LAGUNA BEACH

State  
CA

Zip Code  
92651-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NORTHROP GRUMMAN

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158733**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 506 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMSEN, JOSEPH, , MR.,

Mailing Address 1153 MIRAMAR ST

City

LAGUNA BEACH

State

CA

Zip Code

92651-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NORTHROP GRUMMAN

Occupation (for Individual)

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158735

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THORSON, DON, , MR.,

Mailing Address P.O. BOX 338

City

NEWCASTLE

State

WY

Zip Code

82701-0338

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150768

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIDWELL, PAUL, , ,

Mailing Address P.O. BOX 1217

City

MINEOLA

State

TX

Zip Code

75773-7217

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150043

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1255.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIGNER, WARREN, F., MR.,

Mailing Address 2203 MILLER RD

City  
ROSHARONState  
TXZip Code  
77583-4533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA11.16142478

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIGNER, WARREN, F., MR.,

Mailing Address 2203 MILLER RD

City  
ROSHARONState  
TXZip Code  
77583-4533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16151106

Amount of Each Receipt this Period

255.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TILLERSON, REX, W., MR.,

Mailing Address 624 DOVE CREEK ROAD

City  
BARTONVILLEState  
TXZip Code  
76226-6397FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBILOccupation (for Individual)  
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16160803

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

5355.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TILLMAN, FRED, J., MR.,**

Mailing Address 5645 MURRAY ROAD

City  
MEMPHIS

State  
TN

Zip Code  
38119-3831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTURY MANAGEMENT INC.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146639**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIMBERS, VIOLA, M., MS.,**

Mailing Address 2330 5TH AVE APT 16P  
APT 16P

City  
NEW YORK

State  
NY

Zip Code  
10037-1620

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16144629**

Amount of Each Receipt this Period

90.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOLBERT, FRANK, , MR.,**

Mailing Address 2600 E BROADWAY

City  
LOGANSPOUT

State  
IN

Zip Code  
46947-2004

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139728**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOLBERT, FRANK, , MR.,**

Mailing Address 2600 E BROADWAY

City  
LOGANSPOUT

State  
IN

Zip Code  
46947-2004

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142134**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOLBERT, FRANK, , MR.,**

Mailing Address 2600 E BROADWAY

City  
LOGANSPOUT

State  
IN

Zip Code  
46947-2004

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145527**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOLONEN, JAMES, ROBERT, ,**

Mailing Address P.O. BOX 1119

City  
SOQUEL

State  
CA

Zip Code  
95073-1119

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  
03 / 07 / 2016

**Transaction ID : SA11.16139542**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 510 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TORRES, JOSE, , M.D.**

Mailing Address 333 LEE DRIVE  
APT. 371

City  
BATON ROUGE

State  
LA

Zip Code  
70808-0931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOSE TORRES M.D.

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16138896**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TORRES, JOSE, , M.D.**

Mailing Address 333 LEE DRIVE  
APT. 371

City  
BATON ROUGE

State  
LA

Zip Code  
70808-0931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOSE TORRES M.D.

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159083**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TORRES, JOSE, , M.D.**

Mailing Address 333 LEE DRIVE  
APT. 371

City  
BATON ROUGE

State  
LA

Zip Code  
70808-0931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOSE TORRES M.D.

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159085**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

160.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOTUSEK, ALMA, E., MISS,**

Mailing Address 2125 ELM STREET

City  
FREMONT

State  
NE

Zip Code  
68025-2642

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139614**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOTUSEK, ALMA, E., MISS,**

Mailing Address 2125 ELM STREET

City  
FREMONT

State  
NE

Zip Code  
68025-2642

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151599**

Amount of Each Receipt this Period

135.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRAPANI, HARRIET, , ,**

Mailing Address 80 KIRKLAND STREET

City  
CAMBRIDGE

State  
MA

Zip Code  
02138-2033

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  
03 / 24 / 2016

**Transaction ID : SA11.16153421**

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)..... ►

435.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 512 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRIMBLE, TED, , MR.,

Mailing Address 402 QUITMAN ST

City  
PITTSBURG

State  
TX

Zip Code  
75686-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHTNEY

Occupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

Transaction ID : SA11.16148876

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRIMBLE, TED, , MR.,

Mailing Address 402 QUITMAN ST

City  
PITTSBURG

State  
TX

Zip Code  
75686-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHTNEY

Occupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158711

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRIMBLE, TED, , MR.,

Mailing Address 402 QUITMAN ST

City  
PITTSBURG

State  
TX

Zip Code  
75686-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHTNEY

Occupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160721

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 513 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRIMBLE, TED, , MR.,**

Mailing Address 402 QUITMAN ST

City  
PITTSBURG

State  
TX

Zip Code  
75686-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHTNEY

Occupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162588**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRIMBLE, TED, , MR.,**

Mailing Address 402 QUITMAN ST

City  
PITTSBURG

State  
TX

Zip Code  
75686-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHTNEY

Occupation (for Individual)  
FAMILY PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162594**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TROOP, ROBERT, , MR.,**

Mailing Address 23377 WINGEDFOOT DRIVE

City  
WESTLAKE

State  
OH

Zip Code  
44145-4380

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE SHAMROCK COMPANIES

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145896**

Amount of Each Receipt this Period

1001.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1051.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 514 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROTH, ROBERT, S., MR.,

Mailing Address 3003 GULF SHORE BLVD N APT 301

City  
NAPLESState  
FLZip Code  
34103-3912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16146179

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRUCKENMILLER, KATHY JEAN, L., MRS.,

Mailing Address 625 11TH AVENUE

City  
SIBLEYState  
IAZip Code  
51249-1444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16137182

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRUCKENMILLER, KATHY JEAN, L., MRS.,

Mailing Address 625 11TH AVENUE

City  
SIBLEYState  
IAZip Code  
51249-1444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16161153

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

601.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRUTA, PATRICIA, R., ,**

Mailing Address 521 GARRISON FOREST RD

City  
OWINGS MILLS

State  
MD

Zip Code  
21117-4010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16139276**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRYON, WARREN, , ,**

Mailing Address 216 9TH STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-2111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPITOL COUNSEL

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147431**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TSCHAPPAT, BROCK, , MR.,**

Mailing Address 6115 N DAVIS HWY  
89A

City  
PENSACOLA

State  
FL

Zip Code  
32504-6963

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155785**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TSCHAPPAT, BROCK, , MR.,**

Mailing Address 6115 N DAVIS HWY  
89A

City  
PENSACOLA

State  
FL

Zip Code  
32504-6963

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155786**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUREK, GEORGE, C., MR.,**

Mailing Address 199 N TRANQUIL PATH

City

THE WOODLANDS

State

TX

Zip Code

77380-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VETERANS EVALUATION SERVICES

Occupation (for Individual)  
OWNER/C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139384**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNBULL, ROBERTO, , ,**

Mailing Address 1177 SOUTH 6TH ST

City

INDIANA

State

PA

Zip Code

15701-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16155698**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 OF 923

(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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNBULL, ROBERTO, , ,**

Mailing Address 1177 SOUTH 6TH ST

City  
INDIANAState  
PAZip Code  
15701-3759FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M	D D	Y Y Y Y
03	29	2016

**Transaction ID : SA11.16158845**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TURNBULL, ROBERTO, , ,**

Mailing Address 1177 SOUTH 6TH ST

City  
INDIANAState  
PAZip Code  
15701-3759FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M	D D	Y Y Y Y
03	29	2016

**Transaction ID : SA11.16159483**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TURNER, THOMAS, , MR.,**

Mailing Address 848. CENTRAL. DRIVE

City  
ODESSAState  
TXZip Code  
79761-4202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
03	18	2016

**Transaction ID : SA11.16148576**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

205.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TURNER, THOMAS, , MR.,**

Mailing Address 848. CENTRAL. DRIVE

City  
ODESSA

State  
TX

Zip Code  
79761-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
M.D.

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  
03 / 24 / 2016

**Transaction ID : SA11.16153720**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TUTTON, MERRILL, R., MR.,**

Mailing Address 10040 E HAPPY VALLEY RD  
UNIT 46

City

SCOTTSDALE

State

AZ

Zip Code

85255-2365

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145923**

Amount of Each Receipt this Period

305.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. UBL, STEPHEN, J., MR.,**

Mailing Address 9130 ALDRSHOT DRIVE

City

BETHESDA

State

MD

Zip Code

20817-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16147420**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10355.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 519 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UNNERSTALL, JAMES, A., MR.,**

Mailing Address 20723 HUNT CLUB DR.

City  
FRANKFORT

State  
IL

Zip Code  
60423-1376

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146096**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. UTTER, PATRICIA, , MS.,**

Mailing Address 208 NOYER DR.

City  
AKRON

State  
IN

Zip Code  
46910-9126

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 / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146377**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VALDIVIESO, CHRISTOPHER, , ,**

Mailing Address 211 MULBERRY LANE

City  
DIXON

State  
IL

Zip Code  
61021-8989

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135909**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 520 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALDIVIESO, CHRISTOPHER, , ,**

Mailing Address 211 MULBERRY LANE

City  
DIXON

State  
IL

Zip Code  
61021-8989

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

**Transaction ID : SA11.16137744**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALDIVIESO, CHRISTOPHER, , ,**

Mailing Address 211 MULBERRY LANE

City  
DIXON

State  
IL

Zip Code  
61021-8989

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141655**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VALDIVIESO, CHRISTOPHER, , ,**

Mailing Address 211 MULBERRY LANE

City  
DIXON

State  
IL

Zip Code  
61021-8989

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143031**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALDIVIESO, CHRISTOPHER, , ,

Mailing Address 211 MULBERRY LANE

City  
DIXONState  
ILZip Code  
61021-8989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16153005

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDIVIESO, CHRISTOPHER, , ,

Mailing Address 211 MULBERRY LANE

City  
DIXONState  
ILZip Code  
61021-8989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11.16154548

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VALDIVIESO, CHRISTOPHER, , ,

Mailing Address 211 MULBERRY LANE

City  
DIXONState  
ILZip Code  
61021-8989FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158272

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 522 OF 923

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALENTINE, SCOTT, , MR.,

Mailing Address P.O. BOX 1318

City  
SUGARLOAFState  
CAZip Code  
92386-1318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145261

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALENTINE, SCOTT, , MR.,

Mailing Address P.O. BOX 1318

City  
SUGARLOAFState  
CAZip Code  
92386-1318FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16150214

Amount of Each Receipt this Period

111.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VALLARINO, MANUEL, R., MR.,

Mailing Address 320 AZALEA DRIVE

City  
SURFSIDE BEACHState  
SCZip Code  
29575-5024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COQUINA SAND AND FILL INC.Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16136969

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5261.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALLARINO, MANUEL, R., MR.,**

Mailing Address 320 AZALEA DRIVE

City  
SURFSIDE BEACH

State  
SC

Zip Code  
29575-5024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COQUINA SAND AND FILL INC.

Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16136970**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLARINO, MANUEL, R., MR.,**

Mailing Address 126 WOFFORD RD.

City  
CONWAY

State  
SC

Zip Code  
29526-8815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COQUINA SAND AND FILL INC.

Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146788**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAN AMERONGEN, LEWIS, W., MR.,**

Mailing Address 509 MADISON AVENUE  
2300

City  
NEW YORK

State  
NY

Zip Code  
10022-5501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

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  
03 / 31 / 2016

**Transaction ID : SA11.16162099**

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)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN METER, THOMAS, RAE, MR.,

Mailing Address 1234 W PALM AVE

City  
REDLANDS

State  
CA

Zip Code  
92373-5753

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  
03 / 22 / 2016

Transaction ID : SA11.16152200

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAN VALKENBURGH, RICHARD, , MR.,

Mailing Address 204 GATES AVENUE

City  
HUNTSVILLE

State  
AL

Zip Code  
35801-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAN VALKENBURGH & ASSOCIATES

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139383

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANDERJAGT, MARGARET, , MS.,

Mailing Address 4023 N GALLOWAY DR.

City  
MEMPHIS

State  
TN

Zip Code  
38111-6809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BES

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  
03 / 22 / 2016

Transaction ID : SA11.16152276

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)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANMILLIGA, GLORIA, K., MS.,**

Mailing Address 11400 ST PATRICKS RD

City  
FAIRFAX

State  
IA

Zip Code  
52228-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
NURSE CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162805**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERITY, HEATHER, , MRS.,**

Mailing Address 1089 WEST EXCHANGE PARKWAY  
NUMBER 1206

City  
ALLEN

State  
TX

Zip Code  
75013-7034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE

Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16153873**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERNON, DON, A., MR.,**

Mailing Address 1448 SANTA LUISA DRIVE

City  
SOLANA BEACH

State  
CA

Zip Code  
92075-1619

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141355**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 526 OF 923  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERNON, DON, A., MR.,**

Mailing Address 1448 SANTA LUISA DRIVE

City  
SOLANA BEACH

State  
CA

Zip Code  
92075-1619

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150324**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VINCENT, JULIET, J., MRS.,**

Mailing Address 3107 WOODLAND RIDGE DRIVE

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48323-3568

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 / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142262**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VINE, CRAIG, , ,**

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMA

State  
WI

Zip Code  
54982-8386

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRAIG D VINE

Occupation (for Individual)  
SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135841**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

330.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VINE, CRAIG, , ,

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMAState  
WIZip Code  
54982-8386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRAIG D VINEOccupation (for Individual)  
SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16135843

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VINE, CRAIG, , ,

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMAState  
WIZip Code  
54982-8386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRAIG D VINEOccupation (for Individual)  
SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11.16135844

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VINE, CRAIG, , ,

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMAState  
WIZip Code  
54982-8386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRAIG D VINEOccupation (for Individual)  
SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153140

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VINE, CRAIG, , ,**

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMA

State  
WI

Zip Code  
54982-8386

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CRAIG D VINE

Occupation (for Individual)

SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160476**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VINE, CRAIG, , ,**

Mailing Address W7965 COUNTY RD YY

City  
WAUTOMA

State  
WI

Zip Code  
54982-8386

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CRAIG D VINE

Occupation (for Individual)

SEMI RETIRED DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16161615**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VINTON, DRURY, L., ,**

Mailing Address 34 LILY LANE

City  
WEST LEBANON

State  
NH

Zip Code  
03784-1052

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 ▼

1110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158195**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VOLLMER, JACK, E., ,

Mailing Address 4300 SHELLDRAKE LN

City  
BOYNTON BEACH

State  
FL

Zip Code  
33436-5265

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA11.16157121

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VOLWILER, WALLACE, E., MR.,

Mailing Address 1704 N RIVER VISTA ST

City  
SPOKANE

State  
WA

Zip Code  
99224-5730

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11.16136973

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VON ELBE, JOACHIM JOE, H., MR.,

Mailing Address 3305 TOPPING ROAD

City  
MADISON

State  
WI

Zip Code  
53705-1436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11.16152379

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

600.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAGNER, SCOTT, R., MR.,**

Mailing Address PO BOX 1627

City  
YORK

State  
PA

Zip Code  
17405-1627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENN WASTE INC.

Occupation (for Individual)  
PRESIDENT & OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141060**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALDEN, ROBERT, L., MR.,**

Mailing Address 34 NW 1144 PRIVATE RD.

City  
LEETON

State  
MO

Zip Code  
64761-7134

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142338**

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALDEN, ROBERT, L., MR.,**

Mailing Address 34 NW 1144 PRIVATE RD.

City  
LEETON

State  
MO

Zip Code  
64761-7134

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163659**

Amount of Each Receipt this Period

70.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33540.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER, JON, C., MR.,

Mailing Address 7171 N. HILLSIDE DR.

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253-2865

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNION LIFE & CASUALTY

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161890

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, KEVIN, L., MR.,

Mailing Address 6533 JAY MILLER DR.

City  
FALLS CHURCH

State  
VA

Zip Code  
22041-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
PUBLIC RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155640

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, JIM, , MR.,

Mailing Address 13140 N. MACARTHUR BLVD.

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73142-3017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148327A

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK \$500.00 ON 03/18/2016

SUBTOTAL of Receipts This Page (optional).....▶

3110.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALLACE, JIM, , MR.,

Mailing Address 13140 N. MACARTHUR BLVD.

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73142-3017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148327B

Amount of Each Receipt this Period

-500.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLISON, FRIEDA, K., ,

Mailing Address 1880 LAZY O ROAD

City  
SNOWMASS

State  
CO

Zip Code  
81654-9155

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161821

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALSH, HARRY, , MR.,

Mailing Address 189 S. OAK PARK AVE

City  
OAK PARK

State  
IL

Zip Code  
60302-2901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RE/MAX

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16151297

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

-150.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALTER, LEO, , ,**

Mailing Address 4213 PASCAL PLACE

City  
PALOS VERDES PENINSULA

State  
CA

Zip Code  
90274-3943

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16145565**

Amount of Each Receipt this Period

275.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALTERS, THOMAS, R., MR.,**

Mailing Address 6536 BELMONT ST

City  
HOUSTON

State  
TX

Zip Code  
77005-3804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBIL

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16143488**

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALTON, JIM, C., MR.,**

Mailing Address P.O. BOX 1860

City  
BENTONVILLE

State  
AR

Zip Code  
72712-1860

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARVEST BANK GROUP

Occupation (for Individual)  
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16152490**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

34925.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALTON, LYNNE, , MRS.,**

Mailing Address 308 NE C ST.

City  
BENTONVILLE

State  
AR

Zip Code  
72712-5331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARVEST BANK GROUP

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16152489**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARD, CHARLES, , MR.,**

Mailing Address 1 E END AVE APT. 10B

City  
NEW YORK

State  
NY

Zip Code  
10075-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARELLA WEINBERG PARTNERS LLC

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151759**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARDEN, JOHN, L., MR.,**

Mailing Address 125 BROAD STREET

City  
NEW YORK

State  
NY

Zip Code  
10004-2400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SULLIVAN & CROMWELL LLP

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16149398**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARDEN, JOHN, L., MR.,**

Mailing Address 125 BROAD STREET

City  
NEW YORK

State  
NY

Zip Code  
10004-2400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SULLIVAN & CROMWELL LLP

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160356**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WARGO, NANCY, , MS.,**

Mailing Address 4314 ASHLAND AVE.

City  
LORAIN

State  
OH

Zip Code  
44053-2909

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162295**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATERS, DALE, , ,**

Mailing Address 4267 GREENVIEW DR.

City  
EL DORADO HILLS

State  
CA

Zip Code  
95762-7622

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  
03 / 29 / 2016

**Transaction ID : SA11.16158606**

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)..... ►

325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERSTRAT, DICK, , ,**

Mailing Address 10104 LITTLE POND PL. APT. 6

City  
MONTGOMRY VLG

State  
MD

Zip Code  
20886-3856

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148438**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATSON, RONALD, , ,**

Mailing Address 880 COUNTY ROAD 513

City  
MIDLAND CITY

State  
AL

Zip Code  
36350-3754

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  
03 / 29 / 2016

**Transaction ID : SA11.16158928**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATTON, LINDSAY, F., MR., JR.**

Mailing Address 509 HUNTERS LN

City  
ORELAND

State  
PA

Zip Code  
19075-2339

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143573**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 537 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEATHERFORD, TED, , MR.,

Mailing Address 7464 SPILLWAY RD.

City  
SAN ANGELO

State  
TX

Zip Code  
76904-3997

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 ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16144903

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEAVER, JOHN, , MR.,

Mailing Address 82 SKIFF LANE

City  
PORT LUDLOW

State  
WA

Zip Code  
98365-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16147315

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEAVER, JOHN, , MR.,

Mailing Address 82 SKIFF LANE

City  
PORT LUDLOW

State  
WA

Zip Code  
98365-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16152973

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

2200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEAVER, JOHN, , MR.,

Mailing Address 82 SKIFF LANE

City  
PORT LUDLOW

State  
WA

Zip Code  
98365-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160612

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, ROBERT, T., MR.,

Mailing Address 4516 DREXEL AVE

City  
EDINA

State  
MN

Zip Code  
55424-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED HEALTHCARE

Occupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16144905

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBER, BENNETT, , ,

Mailing Address 18 RIONDA COURT

City  
ALPINE

State  
NJ

Zip Code  
07620-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DAVID WEBER OIL CO

Occupation (for Individual)  
SALES

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  
03 / 18 / 2016

Transaction ID : SA11.16148598

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBER, DANIEL, , MR.,

Mailing Address 39308 TREELINE DR.

City  
LADY LAKE

State  
FL

Zip Code  
32159-6017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMAC

Occupation (for Individual)  
MANAGER

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  
03 / 29 / 2016

Transaction ID : SA11.16159551

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEEKS, ANNIE, H., MS.,

Mailing Address 3411 ROCK LN

City  
BIRMINGHAM

State  
AL

Zip Code  
35210-3708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16163796

Amount of Each Receipt this Period

210.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEGGE, TIMOTHY, , ,

Mailing Address 31331 ACADEMY RD

City  
BURLINGTON

State  
WI

Zip Code  
53105-9790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BURLINGTON RV SUPERSTORE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA11.16139070

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

760.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEGGE, TIMOTHY, , ,**

Mailing Address 31331 ACADEMY RD

City  
BURLINGTON

State  
WI

Zip Code  
53105-9790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BURLINGTON RV SUPERSTORE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154650**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEGGE, TIMOTHY, , ,**

Mailing Address 31331 ACADEMY RD

City  
BURLINGTON

State  
WI

Zip Code  
53105-9790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BURLINGTON RV SUPERSTORE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154651**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEINER, S., EVAN, MR.,**

Mailing Address 27235 OVID CT.

City  
FRANKLIN

State  
MI

Zip Code  
48025-1036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDW. C. LEVY CO.

Occupation (for Individual)  
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155660**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1040.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELCH, JASPER, A., MR., JR.**

Mailing Address 2121 KIRBY DR. BOX 4

City  
HOUSTON

State  
TX

Zip Code  
77019-6064

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144982**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLEMAYER, JOHN, C., MR.,**

Mailing Address 89 ROSEDALE RD

City  
PRINCETON

State  
NJ

Zip Code  
08540-6701

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146013**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLER, MARK, F., MR.,**

Mailing Address 7 BETONY PL

City  
SPRING

State  
TX

Zip Code  
77382-4404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16152088**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

905.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11.16136948**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2016

**Transaction ID : SA11.16138158**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141836**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16143027**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146705**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELLS, LYLE, L., MR.,**

Mailing Address 1751 W BOWLING ST

City  
ANAHEIM

State  
CA

Zip Code  
92804-5504

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11.16148925**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WELLS, LYLE, L., MR.,

Mailing Address 1751 W BOWLING ST

City  
ANAHEIMState  
CAZip Code  
92804-5504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.16160674

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEST, JERRY, W., MR.,

Mailing Address 151 ST. GEORGE PLACE

City  
BNERMUDA RUNState  
NCZip Code  
27006-8542FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
03 / 30 / 2016

Transaction ID : SA11.16160396

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, DAVID, , ,

Mailing Address 300 KENTUCKY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-2322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

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  
03 / 24 / 2016

Transaction ID : SA11.16155667

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

400.00

TOTAL This Period (last page this line number only)..... ▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, DUNCAN, , ,**

Mailing Address 9694 E LEGACY LANE

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255-6331

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141629**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITED, EDITH, , ,**

Mailing Address 309 SHORELINE DR.

City  
GULF BREEZE

State  
FL

Zip Code  
32561-4512

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146168**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, JOEL, , ,**

Mailing Address 1707 VALLEY AVE

City  
MCLEAN

State  
VA

Zip Code  
22101-4721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HORIZON GOVERNMENT AFFAIRS

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144856**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 546 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, LETITIA, H., MS.,**

Mailing Address 13901 PISCATAWAY DRIVE

City  
FORT WASHINGTON

State  
MD

Zip Code  
20744-6639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INNOVATIVE FEDERAL STRATEGIES

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139391**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITE, NANCY, A., MRS.,**

Mailing Address 3800 SHAMROCK DR.

City  
CHARLOTTE

State  
NC

Zip Code  
28215-3220

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 ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141036**

Amount of Each Receipt this Period

242.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, WALTER, R., MR.,**

Mailing Address 4833 MCDONALD DRIVE CIRCLE N

City  
STILLWATER

State  
MN

Zip Code  
55082-2150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANZ LIFE INS. COMPANY

Occupation (for Individual)  
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169744**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18242.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 547 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITMAN, GERALD, , ,**

Mailing Address 3708 ELGIN STREET

City  
METAIRIE

State  
LA

Zip Code  
70001-3908

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2016

**Transaction ID : SA11.16144760**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIDTFELDT, JAMES, A., DR.,**

Mailing Address 103 E STATE ST.

City  
ATKINSON

State  
NE

Zip Code  
68713-4537

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JAMES WIDTFELDT OFFICE

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141082**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIEGAND, SAMUEL, J., MR.,**

Mailing Address 6584 CHAMPETRE COURT

City  
RENO

State  
NV

Zip Code  
89511-5077

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.16151761**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 548 OF 923  
(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIENECKE, NATHANIEL, , ,**

Mailing Address 444 N. CAPITOL STREET, NW, SUITE 8

City  
WASHINGTONState  
DCZip Code  
20001-FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PCIOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
03	14	2016

**Transaction ID : SA11.16144850**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WIKEL, ERNEST, , MR.,**

Mailing Address 9165 PLUMGROVE WAY

City  
SACRAMENTOState  
CAZip Code  
95826-5043FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
03	09	2016

**Transaction ID : SA11.16141822**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILCOX, STARLEY, MANUELL, MRS.,**

Mailing Address 1839 EAGLE FALLS STREET

City  
HOUSTONState  
TXZip Code  
77077-4922FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M	D D	Y Y Y Y
03	01	2016

**Transaction ID : SA11.16136343**

Amount of Each Receipt this Period

76.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

426.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLCOXON, SAM, , ,**

Mailing Address 64 FALCON HILLS DR.

City  
HIGHLANDS RANCH

State  
CO

Zip Code  
80126-2901

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16160623**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, DOUGLAS, , MR.,**

Mailing Address 8707 CRESTWOOD AVE

City  
MUNSTER

State  
IN

Zip Code  
46321-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16144245**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, EMMA, , MS.,**

Mailing Address 2601 W 82ND ST

City  
INGLEWOOD

State  
CA

Zip Code  
90305-1428

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16175328A**

Amount of Each Receipt this Period

600.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK \$600.00 ON 03/23/2016

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, EMMA, , MS.,

Mailing Address 2601 W 82ND ST

City  
INGLEWOODState  
CAZip Code  
90305-1428FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.16175328B

Amount of Each Receipt this Period

-600.00

☐ Memo Item  
CONTRIBUTION

CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JACK, , ,

Mailing Address 3745 AVIEMORE DRIVE

City  
FORT WORTHState  
TXZip Code  
76109-4858FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

EXXON MOBIL

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16155662

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, LEAH, A., MS.,

Mailing Address 322 HORSESHOE RD

City  
MORGANTOWNState  
WVZip Code  
26508-5308FEC 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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16146847

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

4425.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 551 OF 923  
(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILLIAMS, LEAH, A., MS.,**

Mailing Address 322 HORSESHOE RD

City  
MORGANTOWNState  
WVZip Code  
26508-5308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2016

**Transaction ID : SA11.16160284**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, ROBERT, , ,**

Mailing Address 1979 HEIDELBERG DR.

City  
MY PLEASANTState  
SCZip Code  
29464-3967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2016

**Transaction ID : SA11.16148924**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JAMES, , MR.,**Mailing Address 2251 VISTA DR. E-302  
E-302City  
JUNEAUState  
AKZip Code  
99801-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

**Transaction ID : SA11.16153867**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

205.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 552 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, JOANNE, G., MS.,**

Mailing Address 27 E BRIAR HOLLOW LN

City  
HOUSTON

State  
TX

Zip Code  
77027-2919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16150960**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JOANNE, G., MS.,**

Mailing Address 27 E BRIAR HOLLOW LN

City  
HOUSTON

State  
TX

Zip Code  
77027-2919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA11.16151055**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, LOYCE, , MS.,**

Mailing Address 732 SEVILLE RD

City  
DENTON

State  
TX

Zip Code  
76205-8495

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135939**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, LOYCE, , MS.,**

Mailing Address 732 SEVILLE RD

City  
DENTON

State  
TX

Zip Code  
76205-8495

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138794**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, LOYCE, , MS.,**

Mailing Address 732 SEVILLE RD

City  
DENTON

State  
TX

Zip Code  
76205-8495

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16153748**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, LOYCE, , MS.,**

Mailing Address 732 SEVILLE RD

City  
DENTON

State  
TX

Zip Code  
76205-8495

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159362**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 554 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, TINA, H., MS.,**

Mailing Address 10433 WILSHIRE BLVD.  
902

City  
LOS ANGELES

State  
CA

Zip Code  
90024-4637

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11.16135958**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, TINA, H., MS.,**

Mailing Address 10433 WILSHIRE BLVD.  
902

City  
LOS ANGELES

State  
CA

Zip Code  
90024-4637

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158536**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WIMPEE, JOE , , MR.,**

Mailing Address 105 W KAUFMAN

City  
ROCKWALL

State  
TX

Zip Code  
75087-3031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FARMERS INSURANCE

Occupation (for Individual)  
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146638**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 555 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINDER, SYLVIA, J., MS.,**

Mailing Address 4002 16TH ST APT 4401

City  
LUBBOCK

State  
TX

Zip Code  
79416-6039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : SA11.16146301**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINDER, SYLVIA, J., MS.,**

Mailing Address 4002 16TH ST APT 4401

City  
LUBBOCK

State  
TX

Zip Code  
79416-6039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.16161165**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINES, ROBERT, A., MR.,**

Mailing Address 1218 JEFFERSON ST

City  
WENATCHEE

State  
WA

Zip Code  
98801-1931

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16148381**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 556 OF 923

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINGFIELD, LEWIS, , ,

Mailing Address 585 EASTERN ISLE AVE

City  
SUMMERVILLEState  
SCZip Code  
29486-6901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16159619

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINGFIELD, SUSAN, G., MS.,

Mailing Address 566 LADY SLIPPER LN

City  
LYNCHBURGState  
VAZip Code  
24502-4995FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11.16141698

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINGFIELD, SUSAN, G., MS.,

Mailing Address 566 LADY SLIPPER LN

City  
LYNCHBURGState  
VAZip Code  
24502-4995FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153677

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINGFIELD, SUSAN, G., MS.,**

Mailing Address 566 LADY SLIPPER LN

City  
LYNCHBURG

State  
VA

Zip Code  
24502-4995

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154540**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINGFIELD, SUSAN, G., MS.,**

Mailing Address 566 LADY SLIPPER LN

City  
LYNCHBURG

State  
VA

Zip Code  
24502-4995

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158286**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINGFIELD, SUSAN, G., MS.,**

Mailing Address 566 LADY SLIPPER LN

City  
LYNCHBURG

State  
VA

Zip Code  
24502-4995

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16158699**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINK, NANCY, E., ,**

Mailing Address 11478 WINK LN.

City  
GREENWOOD

State  
DE

Zip Code  
19950-5853

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16147212**

Amount of Each Receipt this Period

101.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINK, NANCY, E., ,**

Mailing Address 11478 WINK LN.

City  
GREENWOOD

State  
DE

Zip Code  
19950-5853

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA11.16150760**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINTERSTEEN, MARYLEE, , ,**

Mailing Address 4926 WESTERHAM ST

City  
FULSHEAR

State  
TX

Zip Code  
77441-4008

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 ▼

300.00

Date of Receipt

**03 / 08 / 2016**

**Transaction ID : SA11.16141669**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

301.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WISCOMBE, JOHN, P., MR.,

Mailing Address 8805 S SHANNON DR.

City  
TEMPEState  
AZZip Code  
85284-3528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MUSIC CELEBRATIONS INTERNATOccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11.16143126

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WISEMAN, DENISE, , ,

Mailing Address 9810 STATE HIGHWAY 220

City  
CASPERState  
WYZip Code  
82604-9184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16137780

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOJNAR, THEODORE, J., MR.,

Mailing Address 104 CALVI CT.

City  
BELLAIREState  
TXZip Code  
77401-5123FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBILOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16169752

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

2050.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOLFERT, MARK, A., MR.,

Mailing Address 897 S. 300 W.

City  
OREMState  
UTZip Code  
84058-6792FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DOTERRAOccupation (for Individual)  
FINANCE ANALYSTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16149111

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WONG, EDWARD, G., MR.,

Mailing Address 11186 PACEMONT LN.

City  
SAN DIEGOState  
CAZip Code  
92126-4876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

Transaction ID : SA11.16145592

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WONG, EDWARD, G., MR.,

Mailing Address 11186 PACEMONT LN.

City  
SAN DIEGOState  
CAZip Code  
92126-4876FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16164177

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2700.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOOD, CHARLES, , ,

Mailing Address 1469 ROCKVILLE ROAD

City  
FAIRFIELDState  
CAZip Code  
94534-1331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
03 / 07 / 2016

Transaction ID : SA11.16140023

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOOD, TERRY, , ,

Mailing Address 38822 BEECG ST. N POB 91

City  
SCIOState  
ORZip Code  
97374-0091FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161617

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODFORD, MARY, , ,

Mailing Address 90 HEARTHSTONE ROAD

City  
PINEHURSTState  
NCZip Code  
28374-7093FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : SA11.16153063

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

325.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, DARREN, , ,**

Mailing Address 6125 LUTHER LN #114

City  
DALLAS

State  
TX

Zip Code  
75225-6202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXON MOBIL

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155656**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, ELYSE, , MS.,**

Mailing Address P.O. BOX 94

City  
TEMECULA

State  
CA

Zip Code  
92593-0094

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139254**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODS, ELYSE, , MS.,**

Mailing Address P.O. BOX 94

City  
TEMECULA

State  
CA

Zip Code  
92593-0094

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16146879**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODS, RICHARD, , MRS.,**

Mailing Address 2480 DONGARA DR.  
APT. 611

City  
DEXTER

State  
MI

Zip Code  
48130-1586

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162023**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODS, RICHARD, , MRS.,**

Mailing Address 2480 DONGARA DR.  
APT. 611

City  
DEXTER

State  
MI

Zip Code  
48130-1586

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162024**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, ELIZABETH, , ,**

Mailing Address 19 RANDOM ROAD

City  
ENGLEWOOD

State  
CO

Zip Code  
80113-6105

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142849**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, ELIZABETH, , ,**

Mailing Address 19 RANDOM ROAD

City  
ENGLEWOOD

State  
CO

Zip Code  
80113-6105

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16148601

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, JACK, T., ,**

Mailing Address 17504 DAWN CT.

City  
MEADVILLE

State  
PA

Zip Code  
16335-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149883

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, JOHN, L., MR.,**

Mailing Address 24430 9TH PLACE S.

City  
DES MOINES

State  
WA

Zip Code  
98198-3847

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16158591

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WRIGHT, JOHN, L., MR.,**

Mailing Address 24430 9TH PLACE S.

City  
DES MOINES

State  
WA

Zip Code  
98198-3847

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162330**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WRIGHT, KAREN, A., MS.,**

Mailing Address 1240 GAMBIER ROAD

City  
MOUNT VERNON

State  
OH

Zip Code  
43050-3842

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARIEL CORPORATION

Occupation (for Individual)  
PRES AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152457**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WUNDERLICH, JOHN, , MR.,**

Mailing Address 2430 WENDOVER DRIVE

City  
NAPERVILLE

State  
IL

Zip Code  
60565-3255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIDELITY NATIONAL FINANCIAL

Occupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16159644**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WURTZ, ROBERT, D., MR.,**

Mailing Address 18550 W. CAPITOL DRIVE

City  
BROOKFIELD

State  
WI

Zip Code  
53045-1925

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AEGIS CORPORATION

Occupation (for Individual)  
EXECUTIVE

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  
03 / 30 / 2016

**Transaction ID : SA11.16160442**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WUTHIER, ROY, , MR.,**

Mailing Address 714 VINTAGE LANE

City  
COLUMBIA

State  
SC

Zip Code  
29210-5109

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16138819**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WUTHIER, ROY, , MR.,**

Mailing Address 714 VINTAGE LANE

City  
COLUMBIA

State  
SC

Zip Code  
29210-5109

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16152429**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WUTHIER, ROY, , MR.,**

Mailing Address 714 VINTAGE LANE

City  
COLUMBIA

State  
SC

Zip Code  
29210-5109

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154493**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WUTHIER, ROY, , MR.,**

Mailing Address 714 VINTAGE LANE

City  
COLUMBIA

State  
SC

Zip Code  
29210-5109

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154494**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WYSONG, PATRICIA, A., MS.,**

Mailing Address 2707 CLUBLAKE TRL

City  
MC KINNEY

State  
TX

Zip Code  
75070-4009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRAD WYSONG MDBA

Occupation (for Individual)  
BOOKKEEPER

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  
03 / 29 / 2016

**Transaction ID : SA11.16160222**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YATES, LINDA, , MRS.,**

Mailing Address 149 LEISURE COURT

City  
WYOMISSING

State  
PA

Zip Code  
19610-1969

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARLINO CAPITAL MANAGEMENT

Occupation (for Individual)  
CLIENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142939**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YATES, LINDA, , MRS.,**

Mailing Address 149 LEISURE COURT

City  
WYOMISSING

State  
PA

Zip Code  
19610-1969

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARLINO CAPITAL MANAGEMENT

Occupation (for Individual)  
CLIENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16142940**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YATES, LINDA, , MRS.,**

Mailing Address 149 LEISURE COURT

City  
WYOMISSING

State  
PA

Zip Code  
19610-1969

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARLINO CAPITAL MANAGEMENT

Occupation (for Individual)  
CLIENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16154631**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YATES, LINDA, , MRS.,

Mailing Address 149 LEISURE COURT

City  
WYOMISSINGState  
PAZip Code  
19610-1969FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARLINO CAPITAL MANAGEMENTOccupation (for Individual)  
CLIENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16161990

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YEAGER, TERRY, , MR.,

Mailing Address 1281 N STATE ST STEA-340

City  
SAN JACINTOState  
CAZip Code  
92583-6313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
DISTRIBUTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11.16144467

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YEAGER, TERRY, , MR.,

Mailing Address 1281 N STATE ST STEA-340

City  
SAN JACINTOState  
CAZip Code  
92583-6313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
DISTRIBUTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11.16149872

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

261.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. YOUNG, JAMES, F., MR.,**

Mailing Address 100 N. CORPORATE DRIVE - SUITE 100

City  
BROOKFIELD

State  
WI

Zip Code  
53045-5800

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16162148**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNG, ROBERT, , MR.,**

Mailing Address 94 N. 1200 E.

City  
LONDON

State  
UT

Zip Code  
84042-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DOTERRA

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149110**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, RODGER, D., MR.,**

Mailing Address 27725 STANSBURY BLVD  
SUITE 125

City  
FARMINGTON HILLS

State  
MI

Zip Code  
48334-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YOUNG & SUSSER, P.C.

Occupation (for Individual)  
SENIOR PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : SA11.16141856**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3610.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 OF 923

(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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZAMORANO, LUCIA, , DR.,**

Mailing Address 2369 PINE LAKE ROAD

City  
WEST BLOOMFIELDState  
MIZip Code  
48324-1932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LUCIA ZAMORANO, M.D. PLCOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2016

**Transaction ID : SA11.16154897**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZHOU, GUOLIAN, , MR.,**Mailing Address 10288 SAN PEDRO  
# 2City  
SAN ANTONIOState  
TXZip Code  
78216-3820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Z'S MUSICAL L.P.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

**Transaction ID : SA11.16141695**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZIRKELBACH, ROBERT, , ,**

Mailing Address 1740 R STREET NW #1

City  
WASHINGTONState  
DCZip Code  
20009-2410FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PHRMAOccupation (for Individual)  
PUBLIC RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2016

**Transaction ID : SA11.16147416**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZORN-WEST, ANNEROSE, , ,**

Mailing Address 685 CHAGRIN RIVER RD.

City  
GATES MILLS

State  
OH

Zip Code  
44040-9730

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16147250**

Amount of Each Receipt this Period

205.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZUMBUSCH, MURIEL, , ,**

Mailing Address 1710 COUNTY RD 35 W

City  
BUFFALO

State  
MN

Zip Code  
55313-4414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163474**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BGR GOVERNMENT AFFAIRS LLC**

Mailing Address 601 13TH STREET NW 11TH FLOOR SOUT

City  
WASHINGTON

State  
DC

Zip Code  
20005-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16159675**

Amount of Each Receipt this Period

7500.00

☐ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7805.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BARBOUR, HALEY, , ,**

Mailing Address P.O. BOX 14416

City  
WASHINGTON

State  
DC

Zip Code  
20044-4416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
FOUNDING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173481**

Amount of Each Receipt this Period

750.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYER, DAVID, W., MR.,**

Mailing Address 4554 MAGNOLIA MANOR WAY

City  
ALEXANDRIA

State  
VA

Zip Code  
22312-1400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS LLC

Occupation (for Individual)  
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173490**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EARDENSOHN, TODD, , MR.,**

Mailing Address 601 THIRTEENTH STREET NW  
ELEVENTH FLOOR SOUTH

City  
WASHINGTON

State  
DC

Zip Code  
20005-3807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
C.F.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173485**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRIFFITH, LANNY, , MR.,**

Mailing Address 625 OAKLAND TERRACE

City

ALEXANDRIA

State

VA

Zip Code

22302-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BGR GOVERNMENT AFFAIRS LLC

Occupation (for Individual)

C.E.O.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173483**

Amount of Each Receipt this Period

750.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, RYAN, , ,**

Mailing Address 16 S. LEXINGTON ST.

City

ARLINGTON

State

VA

Zip Code

22204-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BGR GROUP

Occupation (for Individual)

LOBBYIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173493**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUKAWSKI, JENNIFER, , ,**

Mailing Address 8704 PLYMOUTH RD

City

ALEXANDRIA

State

VA

Zip Code

22308-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BGR GROUP LLC

Occupation (for Individual)

PRINCIPAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173492**

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MONROE, LOREN, , ,**

Mailing Address 601 THIRTEENTH STREET NW  
ELEVENTH FLOOR SOUTH

City  
WASHINGTON

State  
DC

Zip Code  
20005-3807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16173487**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, DAN, , MR.,**

Mailing Address 601 THIRTEENTH STREET NW  
ELEVENTH FLOOR SOUTH

City  
WASHINGTON

State  
DC

Zip Code  
20005-3807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS LLC

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16173488**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBERTS, WALKER, , ,**

Mailing Address P.O. BOX 14416

City  
WASHINGTON

State  
DC

Zip Code  
20044-4416

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16173489**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROGERS, ED, , MR.,

Mailing Address 601 THIRTEENTH STREET NW  
 ELEVENTH FLOOR SOUTH

City  
 WASHINGTON

State  
 DC

Zip Code  
 20005-3807

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
 CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2016

Transaction ID : SA11.16173482

Amount of Each Receipt this Period

750.00

☒ Memo Item  
 CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VINEY, BILL, , MR.,

Mailing Address 601 THIRTEENTH STREET NW  
 ELEVENTH FLOOR SOUTH

City  
 WASHINGTON

State  
 DC

Zip Code  
 20005-3807

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
 PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2016

Transaction ID : SA11.16173486

Amount of Each Receipt this Period

500.00

☒ Memo Item  
 CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELLS, ERSKINE, , MR.,

Mailing Address 601 13TH ST NW  
 ELEVENTH FLOOR SOUTH

City  
 WASHINGTON

State  
 DC

Zip Code  
 20005-3807

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 BGR GOVERNMENT AFFAIRS LLC

Occupation (for Individual)  
 PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2016

Transaction ID : SA11.16173491

Amount of Each Receipt this Period

500.00

☒ Memo Item  
 CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOOD, BOB, , MR.,**

Mailing Address 601 13TH STREET NW  
ELEVENTH FLOOR SOUTH

City  
WASHINGTON

State  
DC

Zip Code  
20005-3807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GOVERNMENT AFFAIRS, LLC

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16173484**

Amount of Each Receipt this Period

750.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHOCTAW NATION OF OKLAHOMA**

Mailing Address P.O. BOX 1210

City  
DURANT

State  
OK

Zip Code  
74702-1210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155639**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHOCTAW NATION OF OKLAHOMA**

Mailing Address P.O. BOX 1210

City  
DURANT

State  
OK

Zip Code  
74702-1210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

66800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155642**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

REDESIGNATION REQUESTED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. COLUSA INDIAN COMMUNITY COUNCIL**

Mailing Address 3730 HWY. 45

City  
COLUSA

State  
CA

Zip Code  
95932-4022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : SA11.16160807**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JDK HOLDINGS, LLC**

Mailing Address 527 MARQUETTE AVE  
SUITE 500

City  
MINNEAPOLIS

State  
MN

Zip Code  
55402-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16144904**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUEST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MS BAND OF CHOCTAW INDIANS**

Mailing Address PO BOX 6090/101 INDUSTRIAL ROAD  
OFFICE OF FINANCE & ACCOUNTING

City  
CHOCTAW

State  
MS

Zip Code  
39350-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159701**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

21000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ONEIDA INDIAN NATION**

Mailing Address TERRITORY ROAD, BOX 1

City  
ONEIDA

State  
NY

Zip Code  
13421-9304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155641**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PASCUA YAQUI TRIBE**

Mailing Address 7474 SOUTH CAMINO DE OESTE

City  
TUCSON

State  
AZ

Zip Code  
85746-9308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139378**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PECHANGA BAND OF MISSION INDIANS**

Mailing Address P.O. BOX 1477

City  
TEMECULA

State  
CA

Zip Code  
92593-1477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169751**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. SNOQUALMIE TRIBE**

Mailing Address PO BOX 969

8130 RAILROAD AVENUE SUITE 103

City

SNOQUALMIE

State

WA

Zip Code

98065-0969

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169748**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SYCUAN BAND OF THE KUMEYAAY NATION**

Mailing Address 5459 SYCUAN ROAD

City

EL CAJON

State

CA

Zip Code

92019-1821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155637**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301-0713

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

76475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16149560**

Amount of Each Receipt this Period

1425.00

☒ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREGOIRE, FRANK, K., MR.,**

Mailing Address 6285 25TH AVE. N

City  
ST. PETERSBURG

State  
FL

Zip Code  
33710-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GREGOIRE & GREGOIRE INC.

Occupation (for Individual)  
REAL ESTATE APPRAISER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

**Transaction ID : SA11.16151516**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOCK, JOE, , ,**

Mailing Address 1433 PLEASANT ST.

City  
CINCINNATI

State  
OH

Zip Code  
45202-6916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE BROKER

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2016

**Transaction ID : SA11.16151518**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PLATTOS, BILL, G., MR.,**

Mailing Address 13 BEECHWOOD

City  
IRVINE

State  
CA

Zip Code  
92604-4693

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIRST TEAM REAL ESTATE

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2016

**Transaction ID : SA11.16151517**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOTESANE PAC**

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301-0713

FEC ID number of contributing  
federal political committee.

C

C00484535

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

76475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16149561

Amount of Each Receipt this Period

3325.00

☒ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE SEE ATTRIBUTION BELOW

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLARK, KEN, , MR.,**

Mailing Address 1043 20TH ST

City

WEST DES MOINES

State

IA

Zip Code

50265-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CALDWELL BANKER MID-AMERICAN GROUP

Occupation (for Individual)

SALES MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16151520

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLER, CHRISTOPHER, , ,**

Mailing Address 5275 190TH ST. WEST

City

FARMINGTON

State

MN

Zip Code

55024-9431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

REAL ESTATE BROKER

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11.16151519

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAWKINS, PHIL, , ,**

Mailing Address 21110 RIDGE PARK DR.

City  
YORBA LINDA

State  
CA

Zip Code  
92886-7809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PACIFIC WEST ASSOCIATION OF REALTORS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11.16151522**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, NORMAN, , ,**

Mailing Address 662 WHEATSHEAF DRIVE

City  
BATON ROUGE

State  
LA

Zip Code  
70810-0904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

LOUISIANA REALTORS ASSN

Occupation (for Individual)

CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

**Transaction ID : SA11.16151523**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POMPEY, ROBIN, , ,**

Mailing Address 10864 SILVER MAPLE ST.

City  
RICHLAND

State  
MI

Zip Code  
49083-8208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

REAL ESTATE BROKER

Occupation (for Individual)

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16151525**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARK:VOTESANE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 OF 923

(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMPSON, THOMAS, , ,**

Mailing Address 3737 N COUNTRY CLUB

City  
TUCSONState  
AZZip Code  
85716-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE BROKEROccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

**Transaction ID : SA11.16151524**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THESIERA, FIONA, , ,**

Mailing Address 5215 NORTHRIDGE AVE

City  
SAN DIEGOState  
CAZip Code  
92117-1530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE BROKEROccupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

**Transaction ID : SA11.16151521**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301-0713FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

76475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

**Transaction ID : SA11.16151515**

Amount of Each Receipt this Period

950.00

☒ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ►

1000.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BELL, KACY, , ,**

Mailing Address 5205 E 88TH PL

City  
TULSA

State  
OK

Zip Code  
74137-2962

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REAL ESTATE BROKER

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16151527**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIDGEWAY, BOB, , ,**

Mailing Address 4662 TRAWICK DRIVE

City  
JACKSON

State  
MS

Zip Code  
39211-5834

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
C.R. RIDGWAY IV, REALTY

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16151526**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK:VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIA

State  
VA

Zip Code  
22301-0713

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

76475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16163281**

Amount of Each Receipt this Period

3325.00

☒ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANKS, MARCIA, , ,**

Mailing Address 211 THIRD AVENUE SOUTH

City  
FRANKLIN

State  
TN

Zip Code  
37064-2617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRANKLIN REALTORS

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16175946

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LACY, LANCE, S., MR.,**

Mailing Address 2730 OAK HILLS TRAIL

City  
SAN ANGELO

State  
TX

Zip Code  
76904-7573

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LACY & CO. REALTY

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16175945

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAURER, KC, , ,**

Mailing Address 1116 ASTER LANE

City  
WINNECONNE

State  
WI

Zip Code  
54986-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REMAX

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11.16175943

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MC DONALD, ANN, , ,**

Mailing Address 14 REDBUD LANE

City  
WINCHESTER

State  
KY

Zip Code  
40391-2431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLDWELL BANKER MCMAHAN

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16175942**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, DONNA, , ,**

Mailing Address 206 WEST CHURCH ST.

City  
GREER

State  
SC

Zip Code  
29650-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BETTER HOMES REALTY

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16175944**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THEO, MICHAEL, , ,**

Mailing Address 420 MARSTON AVE.

City  
MADISON

State  
WI

Zip Code  
53703-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WISCONSIN REALTORS ASSOCIATION

Occupation (for Individual)  
STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2016

**Transaction ID : SA11.16175948**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 923

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALLIN, MICHAEL, , ,**

Mailing Address 647 23RD AVENUE

City  
LONGVIEW

State  
WA

Zip Code  
98632-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REMAX

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11.16175947

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIA

State  
VA

Zip Code  
22301-0713

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

76475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16164547

Amount of Each Receipt this Period

475.00

☒ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE SEE ATTRIBUTION BELOW

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRANDALL, MERI, , ,**

Mailing Address 784 NORTH 2460 WEST

City  
HURRICANE

State  
UT

Zip Code  
84737-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REMAX

Occupation (for Individual)  
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11.16175949

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARK: VOTESANE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

1698334.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ADRIAN SMITH FOR CONGRESS**

Mailing Address 3321 AVENUE I  
SUITE 6

City  
SCOTTSBLUFF

State  
NE

Zip Code  
69361-4587

FEC ID number of contributing  
federal political committee.

**C** C00412890

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139398**

Amount of Each Receipt this Period

6000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ADRIAN SMITH FOR CONGRESS**

Mailing Address 3321 AVENUE I  
SUITE 6

City  
SCOTTSBLUFF

State  
NE

Zip Code  
69361-4587

FEC ID number of contributing  
federal political committee.

**C** C00412890

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151462**

Amount of Each Receipt this Period

30000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ANDY BARR FOR CONGRESS INC.**

Mailing Address P.O. BOX 2059

City  
LEXINGTON

State  
KY

Zip Code  
40588-2059

FEC ID number of contributing  
federal political committee.

**C** C00467571

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

**03** / **24** / **2016**

**Transaction ID : SA11.16155633**

Amount of Each Receipt this Period

1600.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

37600.00

# **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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BILIRAKIS FOR CONGRESS**

Mailing Address PO BOX 606

City

TARPON SPRINGS

State

FL

Zip Code

34688-0606

FEC ID number of contributing  
federal political committee.

**C**

C00408534

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

116000.00

Date of Receipt

**MM / DD / YYYY**  
03 / 23 / 2016

**Transaction ID : SA11.16155070**

Amount of Each Receipt this Period

30000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BILL FLORES FOR CONGRESS**

Mailing Address P.O. BOX 6207

City

BRYAN

State

TX

Zip Code

77805-6207

FEC ID number of contributing  
federal political committee.

**C**

C00472241

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

45350.00

Date of Receipt

**MM / DD / YYYY**  
03 / 17 / 2016

**Transaction ID : SA11.16149102**

Amount of Each Receipt this Period

21350.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BILL FLORES FOR CONGRESS**

Mailing Address P.O. BOX 6207

City

BRYAN

State

TX

Zip Code

77805-6207

FEC ID number of contributing  
federal political committee.

**C**

C00472241

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

45350.00

Date of Receipt

**MM / DD / YYYY**  
03 / 17 / 2016

**Transaction ID : SA11.16149105**

Amount of Each Receipt this Period

24000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

75350.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BILL JOHNSON FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 14496

City  
POLAND

State  
OH

Zip Code  
44514-7496

FEC ID number of contributing  
federal political committee.

**C**

C00424424

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169717**

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BISHOP FOR CONGRESS**

Mailing Address P.O. BOX 1776

City

BRIGHAM CITY

State

UT

Zip Code

84302-1776

FEC ID number of contributing  
federal political committee.

**C**

C00374231

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148265**

Amount of Each Receipt this Period

9000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BLAINE FOR CONGRESS INC. 2016**

Mailing Address PO BOX 96

City

SAINT ELIZABETH

State

MO

Zip Code

65075-0096

FEC ID number of contributing  
federal political committee.

**C**

C00458679

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155074**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

79000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BUDDY CARTER FOR CONGRESS**

Mailing Address 200 E SAINT JULIAN STREET

City  
SAVANNAH

State  
GA

Zip Code  
31401-2700

FEC ID number of contributing  
federal political committee.

**C** C00543967

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155076**

Amount of Each Receipt this Period

6000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BUILDING AND RESTORING THE AMERICAN DREAM FUND**

Mailing Address PO BOX 30844

City  
BETHESDA

State  
MD

Zip Code  
20824-0844

FEC ID number of contributing  
federal political committee.

**C** C00590356

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **16** / **2016**

**Transaction ID : SA11.16149090**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CATHY MCMORRIS RODGERS FOR CONGRESS**

Mailing Address P.O. BOX 137

City  
SPOKANE

State  
WA

Zip Code  
99210-0137

FEC ID number of contributing  
federal political committee.

**C** C00390476

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

**03** / **17** / **2016**

**Transaction ID : SA11.16149104**

Amount of Each Receipt this Period

12000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CHARLIE DENT FOR CONGRESS**

Mailing Address P.O. BOX 442

City  
ALLENTOWN

State  
PA

Zip Code  
18105-0442

FEC ID number of contributing  
federal political committee.

**C**

C00386847

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148264**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE**

Mailing Address 735 BROAD STREET  
SUITE 1000 JAMES BUILDING

City  
CHATTANOOGA

State  
TN

Zip Code  
37402-1804

FEC ID number of contributing  
federal political committee.

**C**

C00461822

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : SA11.16139397**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. DR. BRIAN BABIN FOR CONGRESS**

Mailing Address P.O. BOX 159

City  
WOODVILLE

State  
TX

Zip Code  
75979-0159

FEC ID number of contributing  
federal political committee.

**C**

C00553859

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148267**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

70000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 594 OF 923  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUFFY FOR CONGRESS**

Mailing Address PO BOX 538

City  
WAUSAUState  
WIZip Code  
54402-0538FEC ID number of contributing  
federal political committee.**C**

C00464339

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

32000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

**Transaction ID : SA11.16155075**

Amount of Each Receipt this Period

32000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRIENDS OF JEB HENSARLING**

Mailing Address P.O. BOX 820504

City  
DALLASState  
TXZip Code  
75382-0504FEC ID number of contributing  
federal political committee.**C**

C00370650

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

**Transaction ID : SA11.16149101**

Amount of Each Receipt this Period

1000000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIENDS OF ERIK PAULSEN**

Mailing Address P.O. BOX 44369

City  
EDEN PRAIRIEState  
MNZip Code  
55344-1369FEC ID number of contributing  
federal political committee.**C**

C00439661

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.16169713**

Amount of Each Receipt this Period

6000.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

1038000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. FRIENDS OF SUSAN BROOKS**

Mailing Address 4874 WINDRIFT WAY

City  
CARMEL

State  
IN

Zip Code  
46033-9507

FEC ID number of contributing  
federal political committee.

**C** C00500207

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41900.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169726**

Amount of Each Receipt this Period

41900.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. GRAVES FOR CONGRESS**

Mailing Address 2345 GRAND BLVD.  
SUITE 2400

City  
KANSAS CITY

State  
MO

Zip Code  
64108-2642

FEC ID number of contributing  
federal political committee.

**C** C00359034

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8100.00

Date of Receipt

**03** / **08** / **2016**

**Transaction ID : SA11.16141860**

Amount of Each Receipt this Period

8100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HAL ROGERS FOR CONGRESS**

Mailing Address P.O. BOX 1214

City  
SOMERSET

State  
KY

Zip Code  
42502-1214

FEC ID number of contributing  
federal political committee.

**C** C00116632

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169711**

Amount of Each Receipt this Period

221000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

271000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 596 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JAIME FOR CONGRESS**

Mailing Address P.O. BOX 1614

City  
RIDGEFIELD

State  
WA

Zip Code  
98642-0020

FEC ID number of contributing  
federal political committee.

**C**

C00472704

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

65000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11.16141862**

Amount of Each Receipt this Period

65000.00

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JEFF FORTENBERRY FOR UNITED STATES CONGRESS**

Mailing Address P.O. BOX 30265

City  
LINCOLN

State  
NE

Zip Code  
68503-0265

FEC ID number of contributing  
federal political committee.

**C**

C00395467

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169722**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JENKINS FOR CONGRESS**

Mailing Address P.O. BOX 727

City  
HUNTINGTON

State  
WV

Zip Code  
25711-0727

FEC ID number of contributing  
federal political committee.

**C**

C00548271

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

17000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16147282**

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

74000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JENKINS FOR CONGRESS**

Mailing Address P.O. BOX 727

City  
HUNTINGTON

State  
WV

Zip Code  
25711-0727

FEC ID number of contributing  
federal political committee.

**C** C00548271

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155077**

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address P.O. BOX 12667

City  
BAKERSFIELD

State  
CA

Zip Code  
93389-2667

FEC ID number of contributing  
federal political committee.

**C** C00420935

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359325.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16163286**

Amount of Each Receipt this Period

206600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. LUKE MESSER FOR CONGRESS**

Mailing Address 345 WEST BROADWAY STREET

City  
SHELBYVILLE

State  
IN

Zip Code  
46176-1001

FEC ID number of contributing  
federal political committee.

**C** C00460667

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

37599.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169727**

Amount of Each Receipt this Period

37599.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

247199.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MCCLINTOCK FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DRIVE  
SUITE 150

City  
SACRAMENTO

State  
CA

Zip Code  
95833-4131

FEC ID number of contributing  
federal political committee.

**C**

C00446815

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **29** / **2016**

**Transaction ID : SA11.16160811**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MCHENRY FOR CONGRESS**

Mailing Address PO BOX 2165

City  
GASTONIA

State  
NC

Zip Code  
28053-2165

FEC ID number of contributing  
federal political committee.

**C**

C00393629

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139396**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MCKINLEY FOR CONGRESS**

Mailing Address 32 20TH STREET

City  
WHEELING

State  
WV

Zip Code  
26003-3746

FEC ID number of contributing  
federal political committee.

**C**

C00473132

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169715**

Amount of Each Receipt this Period

35000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MICHAEL BURGESS FOR CONGRESS**

Mailing Address P.O. BOX 2334

City  
**DENTON**

State  
**TX**

Zip Code  
**76202-2334**

FEC ID number of contributing  
federal political committee.

**C**

**C00372532**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**10000.00**

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16148262**

Amount of Each Receipt this Period

**10000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PETE SESSIONS FOR CONGRESS**

Mailing Address P.O. BOX 823047

City  
**DALLAS**

State  
**TX**

Zip Code  
**75382-3047**

FEC ID number of contributing  
federal political committee.

**C**

**C00303305**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**10000.00**

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16148261**

Amount of Each Receipt this Period

**10000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. RANDY HULTGREN FOR CONGRESS**

Mailing Address P.O. BOX 717

City  
**ST CHARLES**

State  
**IL**

Zip Code  
**60174-0717**

FEC ID number of contributing  
federal political committee.

**C**

**C00467522**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**20000.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA11.16169725**

Amount of Each Receipt this Period

**20000.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**40000.00**

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City  
TAYLORVILLE

State  
IL

Zip Code  
62568-0344

FEC ID number of contributing  
federal political committee.

**C**

C00521948

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155073**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. RYAN FOR CONGRESS**

Mailing Address P.O. BOX 1488

City  
JANESVILLE

State  
WI

Zip Code  
53547-1488

FEC ID number of contributing  
federal political committee.

**C**

C00330894

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1594062.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169716**

Amount of Each Receipt this Period

1117217.34

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SIMPSON FOR CONGRESS**

Mailing Address 786 HOFF DRIVE

City  
BLACKFOOT

State  
ID

Zip Code  
83221-1553

FEC ID number of contributing  
federal political committee.

**C**

C00331397

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149100**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

1217217.34

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STEVE CHABOT FOR CONGRESS**

Mailing Address 2300 MONTANA AVE  
STE 406

City  
CINCINNATI

State  
OH

Zip Code  
45211-3892

FEC ID number of contributing  
federal political committee.

**C** C00301838

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25550.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169714**

Amount of Each Receipt this Period

25550.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STIVERS FOR CONGRESS**

Mailing Address 4679 WINTERSET DRIVE

City

COLUMBUS

State

OH

Zip Code

43220-8113

FEC ID number of contributing  
federal political committee.

**C** C00441352

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169728**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. TED POE FOR CONGRESS**

Mailing Address P.O. BOX 14222

City

HUMBLE

State

TX

Zip Code

77347-4222

FEC ID number of contributing  
federal political committee.

**C** C00392670

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

18290.00

Date of Receipt

**03** / **17** / **2016**

**Transaction ID : SA11.16149103**

Amount of Each Receipt this Period

18290.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53840.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOM RICE FOR CONGRESS**

Mailing Address 950 48TH AVENUE NORTH SUITE 200

City  
MYRTLE BEACHState  
SCZip Code  
29577-5434FEC ID number of contributing  
federal political committee.

C C00506048

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

48334.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148263

Amount of Each Receipt this Period

34334.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TOM RICE FOR CONGRESS**

Mailing Address 950 48TH AVENUE NORTH SUITE 200

City  
MYRTLE BEACHState  
SCZip Code  
29577-5434FEC ID number of contributing  
federal political committee.

C C00506048

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

48334.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.16169729

Amount of Each Receipt this Period

14000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VALADAO FOR CONGRESS**

Mailing Address 504 VAN NESS AVENUE

City  
FRESNOState  
CAZip Code  
93721-2924FEC ID number of contributing  
federal political committee.

C C00499392

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16149091

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

58334.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. VICKY HARTZLER FOR CONGRESS**

Mailing Address P.O. BOX 9265

City  
**SHAWNEE MISSION**

State  
**KS**

Zip Code  
**66201-1865**

FEC ID number of contributing  
federal political committee.

**C**

**C00464602**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**15000.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA11.16169720**

Amount of Each Receipt this Period

**15000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. WALDEN FOR CONGRESS INC.**

Mailing Address P.O. BOX 1091

City  
**HOOD RIVER**

State  
**OR**

Zip Code  
**97031-0037**

FEC ID number of contributing  
federal political committee.

**C**

**C00333427**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**200000.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA11.16169712**

Amount of Each Receipt this Period

**200000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WEBER FOR CONGRESS**

Mailing Address PO BOX 1327

City  
**FRIENDSWOOD**

State  
**TX**

Zip Code  
**77549-1327**

FEC ID number of contributing  
federal political committee.

**C**

**C00502229**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**35000.00**

Date of Receipt

**03 / 17 / 2016**

**Transaction ID : SA11.16149107**

Amount of Each Receipt this Period

**35000.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**250000.00**

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WENSTRUP FOR CONGRESS**

Mailing Address 11881 SPIRAL PASS

City  
CINCINNATIState  
OHZip Code  
45249-1371FEC ID number of contributing  
federal political committee.

C

C00497818

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2016

Transaction ID : SA11.16149089

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WESTERMAN FOR CONGRESS**

Mailing Address P.O. BOX 21097

City  
HOT SPRINGSState  
ARZip Code  
71903-1097FEC ID number of contributing  
federal political committee.

C

C00548180

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : SA11.16149106

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLIANT ENERGY CORPORATION PAC**Mailing Address 801 PENNSYLVANIA AVENUE, NW  
SUITE 640City  
WASHINGTONState  
DCZip Code  
20004-2693FEC ID number of contributing  
federal political committee.

C

C00132092

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

Transaction ID : SA11.16152482

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

22500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ALLSTATE INSURANCE COMPANY PAC**

Mailing Address 2775 SANDERS ROAD  
SUITE A5

City  
NORTHBROOK

State  
IL

Zip Code  
60062-

FEC ID number of contributing  
federal political committee.

**C** C00040253

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **16** / **2016**

**Transaction ID : SA11.16149092**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ALZHEIMERS IMPACT MOVEMENT PAC**

Mailing Address 225 NORTH MICHIGAN AVENUE  
SUITE 1700

City  
CHICAGO

State  
IL

Zip Code  
60601-7652

FEC ID number of contributing  
federal political committee.

**C** C00486928

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169738**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICA'S FUTURE FUND PAC**

Mailing Address 150 SMOKERISE DRIVE

City  
WADSWORTH

State  
OH

Zip Code  
44281-8701

FEC ID number of contributing  
federal political committee.

**C** C00494757

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169721**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN ACADEMY OF OPHTHALMOLOGY PAC**

Mailing Address 655 BEACH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94109-1342

FEC ID number of contributing  
federal political committee.

**C** C00196246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151401**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS PAC**

Mailing Address 725 15TH STREET, NW  
SUITE 500

City  
WASHINGTON

State  
DC

Zip Code  
20005-2152

FEC ID number of contributing  
federal political committee.

**C** C00413955

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151409**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PAC**

Mailing Address 225 REINEKERS LANE  
SUITE 225

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-2856

FEC ID number of contributing  
federal political committee.

**C** C00358903

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155095**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN BAKERS ASSOCIATION PAC**

Mailing Address 1300 I STREET NW SUITE 700 WEST

City  
WASHINGTON

State  
DC

Zip Code  
20005-3314

FEC ID number of contributing  
federal political committee.

**C** C00016386

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151407**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN COLLEGE OF CARDIOLOGY PAC**

Mailing Address 2400 N. STREET, NW

City  
WASHINGTON

State  
DC

Zip Code  
20037-1153

FEC ID number of contributing  
federal political committee.

**C** C00375360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169776**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN COLLEGE OF SURGEONS PAC**

Mailing Address 20 F STREET NW  
SUITE 1000

City  
WASHINGTON

State  
DC

Zip Code  
20001-6701

FEC ID number of contributing  
federal political committee.

**C** C00382424

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169781**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN GASTROENTEROLOGICAL ASSOCIATION INC.PAC**

Mailing Address 4926 DEL RAY AVE

City  
BETHESDA

State  
MD

Zip Code  
20814-3441

FEC ID number of contributing  
federal political committee.

**C**

C00423228

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA11.16169742**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

CONTRIBUTION REFLECTS CORRECT DONOR

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20001-1430

FEC ID number of contributing  
federal political committee.

**C**

C00000422

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03 / 07 / 2016**

**Transaction ID : SA11.16139390**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN MARITIME OFFICERS VOLUNTARY PAC**

Mailing Address 490 L'ENFANT PLAZA EAST, SW S-7204

City  
WASHINGTON

State  
DC

Zip Code  
20024-

FEC ID number of contributing  
federal political committee.

**C**

C00027532

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA11.16152479**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

22500.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN MARITIME OFFICERS VOLUNTARY PAC**

Mailing Address 490 L'ENFANT PLAZA EAST, SW S-7204

City  
WASHINGTON

State  
DC

Zip Code  
20024-

FEC ID number of contributing  
federal political committee.

**C** C00027532

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152480**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN OPTOMETRIC ASSOCIATION PAC**

Mailing Address 1505 PRINCE STREET SUITE 300

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-2874

FEC ID number of contributing  
federal political committee.

**C** C00024968

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169778**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS PAC**

Mailing Address 2831 LONE OAK ROAD

City  
PADUCAH

State  
KY

Zip Code  
42003-8041

FEC ID number of contributing  
federal political committee.

**C** C00351197

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139394**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN SUPPLY ASSOCIATION PAC**

Mailing Address 1200 N ARLINGTON HEIGHTS RD # 150

City  
ITASCA

State  
IL

Zip Code  
60143-1284

FEC ID number of contributing  
federal political committee.

**C** C00166074

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148274**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION**

Mailing Address 2200 RESEARCH BLVD

City

ROCKVILLE

State

MD

Zip Code

20850-

FEC ID number of contributing  
federal political committee.

**C** C00210666

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169768**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ANHEUSER-BUSCH PAC**

Mailing Address 1401 I. STREET, NW  
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20005-6549

FEC ID number of contributing  
federal political committee.

**C** C00034488

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169779**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. APOLLO GROUP INC PAC**

Mailing Address 4615 EAST ELWOOD STREET  
SUITE 400

City  
PHOENIX

State  
AZ

Zip Code  
85040-1958

FEC ID number of contributing  
federal political committee.

**C** C00309781

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139389**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ARCH COAL PAC (ARCHPAC)**

Mailing Address ONE CITY PLACE DRIVE

City

SAINT LOUIS

State

MO

Zip Code

63141-7014

FEC ID number of contributing  
federal political committee.

**C** C00167668

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139392**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ARENT FOX LLP PAC (AFPAC)**

Mailing Address 1050 CONNECTICUT AVE NW

City

WASHINGTON

State

DC

Zip Code

20036-5303

FEC ID number of contributing  
federal political committee.

**C** C00241380

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155088**

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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**TOTAL** This Period (last page this line number only)..... ►

31500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ASSOCIATED BUILDERS AND CONTRACTORS PAC**

Mailing Address 440 FIRST STREET NW  
SUITE 200

City  
WASHINGTON

State  
DC

Zip Code  
20001-2028

FEC ID number of contributing  
federal political committee.

**C** C00010421

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169771**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ASSOCIATED GENERAL CONTRACTORS PAC**

Mailing Address 53 D STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-4017

FEC ID number of contributing  
federal political committee.

**C** C00082917

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169777**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ASTELLAS US LLC PAC (ASTELLAS PAC)**

Mailing Address 1 ASTELLAS WAY

City  
NORTHBROOK

State  
IL

Zip Code  
60062-6111

FEC ID number of contributing  
federal political committee.

**C** C00444885

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **29** / **2016**

**Transaction ID : SA11.16160810**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ASTRAZENECA PHARMACEUTICALS PAC**

Mailing Address 701 PENNSYLVANIA AVENUE NW  
SUITE 500

City  
WASHINGTON

State  
DC

Zip Code  
20004-2624

FEC ID number of contributing  
federal political committee.

**C** C70003181

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16159673**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BASF CORPORATION**

Mailing Address 700 12TH STREET, NW  
SUITE 700

City  
WASHINGTON

State  
DC

Zip Code  
20005-4052

FEC ID number of contributing  
federal political committee.

**C** C00340075

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152487**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BAXTER HEALTHCARE PAC**

Mailing Address 1501 K STREET, NW  
SUITE 375

City  
WASHINGTON

State  
DC

Zip Code  
20005-1416

FEC ID number of contributing  
federal political committee.

**C** C00117838

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169773**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BELIEF IN LIFE AND LIBERTY POLITICAL ACTION COMMIT**

Mailing Address PO BOX 906

City  
POLAND

State  
OH

Zip Code  
44514-

FEC ID number of contributing  
federal political committee.

**C** C00545079

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169719**

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BLUE CROSS & BLUE SHIELD OF MICHIGAN PAC**

Mailing Address 1310 G. STREET, NW B102

City  
WASHINGTON

State  
DC

Zip Code  
20005-3000

FEC ID number of contributing  
federal political committee.

**C** C00084061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16159672**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BLUE CROSS & BLUE SHIELD OF MICHIGAN PAC**

Mailing Address 1310 G. STREET, NW B102

City  
WASHINGTON

State  
DC

Zip Code  
20005-3000

FEC ID number of contributing  
federal political committee.

**C** C00084061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16159674**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BROOKE HOLDINGS INC. AND JACKSON NATIONAL LIFE INSURANCE CO.**

Mailing Address 1 CORPORATE WAY

City  
LANSING

State  
MI

Zip Code  
48951-1001

FEC ID number of contributing  
federal political committee.

**C**

C00254953

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151405**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BUILDING AMERICA'S REPUBLICAN REPRESENTATION PAC**

Mailing Address PO BOX 651374

City

POTOMAC FALLS

State

VA

Zip Code

20165-1374

FEC ID number of contributing  
federal political committee.

**C**

C00572271

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148268**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BUILDING AMERICAN CONSERVATISM PAC AKA GO BY BAC P**

Mailing Address PO BOX 1327

City

FRIENDSWOOD

State

TX

Zip Code

77549-1327

FEC ID number of contributing  
federal political committee.

**C**

C00553883

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **17** / **2016**

**Transaction ID : SA11.16149108**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

40000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BUILDING LEADERSHIP AND INSPIRING NEW ENTERPRISE PAC**

Mailing Address PO BOX 96

City

ST. ELIZABETH

State

MO

Zip Code

65075-0096

FEC ID number of contributing  
federal political committee.

**C**

C00489427

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155072**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BURLINGTON NORTHERN SANTA FE RAILPAC (BNSF)**

Mailing Address 1001 G STREET NW

City

WASHINGTON

State

DC

Zip Code

20001-4545

FEC ID number of contributing  
federal political committee.

**C**

C00235739

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152484**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITE**

Mailing Address 101 CONSTITUTION AVE NW  
10TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20001-2153

FEC ID number of contributing  
federal political committee.

**C**

C00001016

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148276**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CATERPILLAR, INC. EMPLOYEE PAC**

Mailing Address 1425 K STREET NW, SUITE 400

City  
WASHINGTONState  
DCZip Code  
20005-3685FEC ID number of contributing  
federal political committee.**C**

C00148031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
03	31	2016

**Transaction ID : SA11.16169775**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIGNA CORPORATION PAC**Mailing Address 601 PENNSYLVANIA AVENUE NW  
S. BLDG. STE. 500City  
WASHINGTONState  
DCZip Code  
20004-2601FEC ID number of contributing  
federal political committee.**C**

C00085316

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
03	28	2016

**Transaction ID : SA11.16159703**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CITIGROUP INC. PAC- FEDERAL**

Mailing Address 1101 PENNSYLVANIA NW SUITE 1000

City  
WASHINGTONState  
DCZip Code  
20004-2524FEC ID number of contributing  
federal political committee.**C**

C00008474

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
03	31	2016

**Transaction ID : SA11.16169739**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CME GROUP, INC. PAC**

Mailing Address 1401 EYE STREET, NW

City  
WASHINGTON

State  
DC

Zip Code  
20005-2204

FEC ID number of contributing  
federal political committee.

**C**

C00076299

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**MM / DD / YYYY**  
03 / 21 / 2016

**Transaction ID : SA11.16152481**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. COMMUNITY ONCOLOGY ALLIANCE PAC**

Mailing Address 100 N HUMPHREYS BLVD

City  
MEMPHIS

State  
TN

Zip Code  
38120-2146

FEC ID number of contributing  
federal political committee.

**C**

C00383976

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**MM / DD / YYYY**  
03 / 10 / 2016

**Transaction ID : SA11.16144909**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CONCERNED AMERICANS FOR FREEDOM & OPPORTUNITY PAC**

Mailing Address 228 SOUTH WASHINGTON STREET  
SUITE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-5404

FEC ID number of contributing  
federal political committee.

**C**

C00481176

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**MM / DD / YYYY**  
03 / 31 / 2016

**Transaction ID : SA11.16169724**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CROWE PAC**

Mailing Address 3815 RIVER CROSSING PKWY

City  
INDIANAPOLIS

State  
IN

Zip Code  
46240-7746

FEC ID number of contributing  
federal political committee.

**C** C00451518

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139395**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CVS/CAREMARK CORPORATION EMPLOYEES PAC**

Mailing Address 1300 I STREET, NW SUITE 525 WEST

City  
WASHINGTON

State  
DC

Zip Code  
20005-3336

FEC ID number of contributing  
federal political committee.

**C** C00384818

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169772**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. DAY & ZIMMERMAN INC. FEDERAL PAC**

Mailing Address 1700 NORTH MOORE STREET, SUITE 150

City  
ARLINGTON

State  
VA

Zip Code  
22209-1911

FEC ID number of contributing  
federal political committee.

**C** C00341271

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169741**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. DENT PAC**

Mailing Address 610 S BOULEVARD

City  
TAMPA

State  
FL

Zip Code  
33606-2647

FEC ID number of contributing  
federal political committee.

**C** C00427930

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10600.00

Date of Receipt

**03** / **24** / **2016**

**Transaction ID : SA11.16155632**

Amount of Each Receipt this Period

10600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DEVRY PAC**

Mailing Address ONE TOWER LANE 10TH FLOOR

City

OAKBROOK TERRACE

State

IL

Zip Code

60181-4671

FEC ID number of contributing  
federal political committee.

**C** C00198606

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **16** / **2016**

**Transaction ID : SA11.16149094**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. DYKEMA GOSSETT FEDERAL PAC**

Mailing Address 1300 I. ST. NW  
SUITE 300 WEST

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.

**C** C00342113

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152485**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. EISAI PAC**

Mailing Address 100 TLCE BLVD.

City

WOODCLIFF LAKE

State

NJ

Zip Code

07677-8404

FEC ID number of contributing  
federal political committee.

C

C00429886

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16147280**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ENERGY PAC OF ENERGY FUTURE HOLDINGS**

Mailing Address 1601 BRYAN STREET

City

DALLAS

State

TX

Zip Code

75201-3430

FEC ID number of contributing  
federal political committee.

C

C00226548

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151406**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ENTERGY (ENPAC)**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 200 EAST

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.

C

C00363879

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155086**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

25000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 622 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ENTERPRISE HOLDINGS, INC. PAC**

Mailing Address 600 CORPORATE PARK DRIVE

City  
SAINT LOUIS

State  
MO

Zip Code  
63105-4204

FEC ID number of contributing  
federal political committee.

**C**

C00219642

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA11.16159671**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ERIE INSURANCE GROUP PAC**

Mailing Address 100 ERIE INSURANCE PLACE

City  
ERIE

State  
PA

Zip Code  
16530-9000

FEC ID number of contributing  
federal political committee.

**C**

C00153577

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16144910**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. EYE OF THE TIGER PAC**

Mailing Address PO BOX 2485

City  
SPRINGFIELD

State  
VA

Zip Code  
22152-0485

FEC ID number of contributing  
federal political committee.

**C**

C00467431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169723**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

25000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. FEDERATION OF AMERICAN HOSPITALS PAC**

Mailing Address 750 9TH STREET NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20001-4595

FEC ID number of contributing  
federal political committee.

**C**

C00002261

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151402**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. FLORIDA EAST COAST INDUSTRIES INC GOOD GOVERNMENT COMMITTEE**

Mailing Address 2855 LE JEUNE ROAD  
FOURTH FLOOR

City

CORAL GABLES

State  
FL

Zip Code  
33134-6612

FEC ID number of contributing  
federal political committee.

**C**

C00544908

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155098**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FLUOR CORPORATION PAC**

Mailing Address 403 E. CAPITOL STREET SE

City

WASHINGTON

State  
DC

Zip Code  
20003-3810

FEC ID number of contributing  
federal political committee.

**C**

C00034132

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169730**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

25000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. GENERAL ATOMICS PAC**

Mailing Address 1899 PENNSYLVANIA AVE, NW

City  
WASHINGTON

State  
DC

Zip Code  
20006-3602

FEC ID number of contributing  
federal political committee.

**C** C00215285

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169770**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. GENERAL DYNAMICS CORPORATION PAC**

Mailing Address 3190 FAIRVIEW PARK DRIVE

City  
FALLS CHURCH

State  
VA

Zip Code  
22042-4530

FEC ID number of contributing  
federal political committee.

**C** C00078451

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169734**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. GRIDIRON PAC- NATIONAL FOOTBALL LEAGUE**

Mailing Address 280 PARK AVENUE  
17TH FLOOR

City  
NEW YORK

State  
NY

Zip Code  
10017-1216

FEC ID number of contributing  
federal political committee.

**C** C00451153

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169740**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. HARRIS CORPORATION PAC**

Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850E

City  
WASHINGTON

State  
DC

Zip Code  
20024-2566

FEC ID number of contributing  
federal political committee.

**C**

C00100321

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169769**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. HCA GOOD GOVERNMENT FUND**

Mailing Address ONE PARK PLAZA

City  
NASHVILLE

State  
TN

Zip Code  
37203-6527

FEC ID number of contributing  
federal political committee.

**C**

C00067231

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11.16148272**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HEALTHCARE FREEDOM FUND**

Mailing Address PO BOX 2485

City  
SPRINGFIELD

State  
VA

Zip Code  
22152-0485

FEC ID number of contributing  
federal political committee.

**C**

C00528414

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : SA11.16149088**

Amount of Each Receipt this Period

33400.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

63400.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. HUNTINGTON BANCSHARES PAC**

Mailing Address 41 SOUTH HIGH STREET

City  
COLUMBUS

State  
OH

Zip Code  
43215-6101

FEC ID number of contributing  
federal political committee.

**C** C00165589

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03 / 23 / 2016**

**Transaction ID : SA11.16155093**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. HUNTINGTON INGALLS INDUSTRIES PAC (SHIPAC)**

Mailing Address 300 M. STREET SE, SUITE 350

City  
WASHINGTON

State  
DC

Zip Code  
20003-3436

FEC ID number of contributing  
federal political committee.

**C** C00325092

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03 / 28 / 2016**

**Transaction ID : SA11.16159707**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ICE CREAM, MILK & CHEESE PAC**

Mailing Address 1250 H. STREET NW #900

City  
WASHINGTON

State  
DC

Zip Code  
20005-3952

FEC ID number of contributing  
federal political committee.

**C** C00128231

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03 / 15 / 2016**

**Transaction ID : SA11.16148273**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. INTERNATIONAL WAREHOUSE LOGISTICS ASSOCIATION PAC**

Mailing Address 2800 S RIVER RD

City  
DES PLAINES

State  
IL

Zip Code  
60018-6001

FEC ID number of contributing  
federal political committee.

**C** C00303032

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151410**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS PAC**

Mailing Address 7234 PARKWAY DRIVE

City  
HANOVER

State  
MD

Zip Code  
21076-1307

FEC ID number of contributing  
federal political committee.

**C** C70003108

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155090**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address P.O. BOX 18254

City  
WASHINGTON

State  
DC

Zip Code  
20036-8254

FEC ID number of contributing  
federal political committee.

**C** C00280222

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169766**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. LAND O'LAKES PAC**

Mailing Address P.O. BOX 64101

City  
ST. PAUL

State  
MN

Zip Code  
55164-0101

FEC ID number of contributing  
federal political committee.

**C**

C00009423

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159706**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. LEVEL 3 COMMUNICATIONS, INC. PAC**

Mailing Address 1025 ELDORADO BOULEVARD

City  
BROOMFIELD

State  
CO

Zip Code  
80021-

FEC ID number of contributing  
federal political committee.

**C**

C00347385

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11.16151408**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. LIFEPOINT HOSPITALS INC. GOOD GOVERNMENT FUND**

Mailing Address 330 SEVEN SPRINGS WAY STE 200

City  
BRENTWOOD

State  
TN

Zip Code  
37027-4536

FEC ID number of contributing  
federal political committee.

**C**

C00347955

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11.16144908**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

20000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. LONE STAR LEADERSHIP PAC**

Mailing Address 7315 WISCONSIN AVE STE 705

City  
BETHESDA

State  
MD

Zip Code  
20814-3202

FEC ID number of contributing  
federal political committee.

**C**

C00415208

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148266**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MAJORITY COMMITTEE PAC (MC PAC)**

Mailing Address PO BOX 10134

City  
BAKERSFIELD

State  
CA

Zip Code  
93389-0134

FEC ID number of contributing  
federal political committee.

**C**

C00428052

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16163285**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MCDONALD'S CORPORATION PAC**

Mailing Address 1099 NEW YORK AVE NW STE 510

City  
WASHINGTON

State  
DC

Zip Code  
20001-4493

FEC ID number of contributing  
federal political committee.

**C**

C00063164

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **28** / **2016**

**Transaction ID : SA11.16159702**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MCGRAW HILL FINANCIAL INC. PAC**

Mailing Address 1221 AVENUE OF THE AMERICAS

City  
NEW YORK

State  
NY

Zip Code  
10020-1001

FEC ID number of contributing  
federal political committee.

**C** C00494682

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169737**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NASDAQ STOCK MARKET INC. PAC**

Mailing Address 1801 K. STREET NW  
FLOOR 8

City  
WASHINGTON

State  
DC

Zip Code  
20006-

FEC ID number of contributing  
federal political committee.

**C** C00366013

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148277**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL APARTMENT ASSOCIATION PAC**

Mailing Address 4300 WILSON BLVD., SUITE 400

City  
ARLINGTON

State  
VA

Zip Code  
22203-4168

FEC ID number of contributing  
federal political committee.

**C** C00113241

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148271**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Mailing Address 2901 TELESTAR COURT

City  
FALLS CHURCH

State  
VA

Zip Code  
22042-1260

FEC ID number of contributing  
federal political committee.

**C** C00005249

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155085**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC**

Mailing Address 412 FIRST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1804

FEC ID number of contributing  
federal political committee.

**C** C00040998

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155087**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVENUE NW

City  
WASHINGTON

State  
DC

Zip Code  
20005-4171

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169732**

Amount of Each Receipt this Period

7500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

37500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL COMMUNITY ACTION PROGRAM PAC**

Mailing Address P.O. BOX 78214

City  
WASHINGTON

State  
DC

Zip Code  
20013-9214

FEC ID number of contributing  
federal political committee.

**C** C00163048

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155096**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NATIONAL RURAL LETTER CARRIERS' ASSOCIATION PAC**

Mailing Address 1630 DUKE STREEET, 4TH FLOOR

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3426

FEC ID number of contributing  
federal political committee.

**C** C00072025

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139388**

Amount of Each Receipt this Period

7500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL RIFLE ASSOCIATION**

Mailing Address 11250 WAPLES MILL RD.

City  
FAIRFAX

State  
VA

Zip Code  
22030-

FEC ID number of contributing  
federal political committee.

**C** C00053553

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **09** / **2016**

**Transaction ID : SA11.16141861**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

32500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL THOROUGHGBRED RACING ASSOCIATION PAC**

Mailing Address 2525 HARRODSBURG ROAD

City  
LEXINGTON

State  
KY

Zip Code  
40504-3355

FEC ID number of contributing  
federal political committee.

**C**

C00360008

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148270**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSN. PAC**

Mailing Address 4121 WILSON BOULEVARD  
10TH FLOOR

City  
ARLINGTON

State  
VA

Zip Code  
22203-1839

FEC ID number of contributing  
federal political committee.

**C**

C00004473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155089**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC**

Mailing Address 25 MASSACHUSETTS AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20001-1430

FEC ID number of contributing  
federal political committee.

**C**

C00150367

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169782**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

20000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NAVIENT PAC**

Mailing Address 2001 EDMUND HALLEY DR.

City  
RESTON

State  
VA

Zip Code  
20191-3436

FEC ID number of contributing  
federal political committee.

**C** C00331835

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA11.16147281**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20036-3201

FEC ID number of contributing  
federal political committee.

**C** C00003251

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA11.16169767**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NELSON MULLINS RILEY & SCARBOROUGH LLP PAC**

Mailing Address ATLANTIC STATION, 201 17TH STREET,  
SUITE 1700

City  
ATLANTA

State  
GA

Zip Code  
30363-

FEC ID number of contributing  
federal political committee.

**C** C00278895

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03 / 18 / 2016**

**Transaction ID : SA11.16151404**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN**

Mailing Address 1666 K ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20006-1278

FEC ID number of contributing  
federal political committee.

**C**

C00473652

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03** / **24** / **2016**

**Transaction ID : SA11.16155636**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NOVARTIS CORPORATION PAC**

Mailing Address 701 PENNSYLVANIA AVENUE NW  
SUITE 725

City  
WASHINGTON

State  
DC

Zip Code  
20004-2608

FEC ID number of contributing  
federal political committee.

**C**

C00033969

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169733**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NOVO NORDISK PAC**

Mailing Address 1155 F STREET NW  
SUITE 1150

City  
WASHINGTON

State  
DC

Zip Code  
20004-1351

FEC ID number of contributing  
federal political committee.

**C**

C00424838

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139387**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

21000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NUCOR CORPORATION PAC**

Mailing Address 1915 REXFORD ROAD

City  
CHARLOTTE

State  
NC

Zip Code  
28211-3465

FEC ID number of contributing  
federal political committee.

**C**

C00379628

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **11** / **2016**

**Transaction ID : SA11.16147279**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. OGE ENERGY CORP. EMPLOYEES PAC**

Mailing Address PO BOX 321

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73101-0321

FEC ID number of contributing  
federal political committee.

**C**

C00337808

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155094**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ORACLE CORPORATION PAC**

Mailing Address 1015 15TH STREET NW  
SUITE 200

City  
WASHINGTON

State  
DC

Zip Code  
20005-2635

FEC ID number of contributing  
federal political committee.

**C**

C00323048

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169735**

Amount of Each Receipt this Period

3750.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

13750.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 637 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PARAGRAPH TWO PAC**

Mailing Address 3301 LINCOLN HILL ROAD

City  
MARTINSVILLE

State  
IN

Zip Code  
46151-6349

FEC ID number of contributing  
federal political committee.

**C** C00562256

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **24** / **2016**

**Transaction ID : SA11.16155634**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PATTON BOGGS PAC**

Mailing Address 2550 M. STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20037-1309

FEC ID number of contributing  
federal political committee.

**C** C00401083

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139386**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PFIZER PAC**

Mailing Address 235 E 42ND ST

City  
NEW YORK

State  
NY

Zip Code  
10017-5703

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

14500.00

Date of Receipt

**03** / **29** / **2016**

**Transaction ID : SA11.16160809**

Amount of Each Receipt this Period

4500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

34500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 638 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PIONEER POLITICAL ACTION COMMITTEE**

Mailing Address 701 8TH STREET NW  
SUITE 500

City  
WASHINGTON

State  
DC

Zip Code  
20001-3965

FEC ID number of contributing  
federal political committee.

**C** C00325357

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169718**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. POWERPAC OF ENERGY FUTURE HOLDINGS**

Mailing Address 500 N AKARD STREET

City  
DALLAS

State  
TX

Zip Code  
75201-3302

FEC ID number of contributing  
federal political committee.

**C** C00255950

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA11.16151403**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PRICEWATERHOUSECOOPERS PAC**

Mailing Address 1301 K ST NW  
STE 800W

City  
WASHINGTON

State  
DC

Zip Code  
20005-3317

FEC ID number of contributing  
federal political committee.

**C** C00107235

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **28** / **2016**

**Transaction ID : SA11.16159704**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PRIDE MOBILITY PRODUCTS CORP. PAC**

Mailing Address 182 SUSQUEHANNA AVE.

City  
EXTER

State  
PA

Zip Code  
18643-2653

FEC ID number of contributing  
federal political committee.

**C** C00388132

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148275**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PRINTING INDUSTRIES OF AMERICA PRINTPAC**

Mailing Address 601 13TH STREET NW  
SUITE 350 S.

City  
WASHINGTON

State  
DC

Zip Code  
20005-3861

FEC ID number of contributing  
federal political committee.

**C** C00018028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169731**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC**

Mailing Address 444 N. CAPITOL STREET NW  
SUITE 801

City  
WASHINGTON

State  
DC

Zip Code  
20001-1508

FEC ID number of contributing  
federal political committee.

**C** C00066472

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

**03** / **28** / **2016**

**Transaction ID : SA11.16159705**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

17500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC**

Mailing Address 444 N. CAPITOL STREET NW  
SUITE 801

City  
WASHINGTON

State  
DC

Zip Code  
20001-1508

FEC ID number of contributing  
federal political committee.

**C** C00066472

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169774**

Amount of Each Receipt this Period

1250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PUBLIC SERVICE ENTERPRISE GROUP INC. PAC**

Mailing Address 80 PARK PLAZA

City

NEWARK

State

NJ

Zip Code

07102-4109

FEC ID number of contributing  
federal political committee.

**C** C00383489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169736**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SHERIFF PAC**

Mailing Address 8401 EXCELSIOR DRIVE  
SUITE 103

City

MADISON

State

WI

Zip Code

53717-2908

FEC ID number of contributing  
federal political committee.

**C** C00474841

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155071**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8750.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. SIDLEY AUSTIN LLP**

Mailing Address 1501 K. STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20005-

FEC ID number of contributing  
federal political committee.

**C**

C00351270

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **16** / **2016**

**Transaction ID : SA11.16149093**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SOUTHERN COMPANY PAC**

Mailing Address 601 PENNSYLVANIA AVE, NW SUITE 800

City  
WASHINGTON

State  
DC

Zip Code  
20004-2601

FEC ID number of contributing  
federal political committee.

**C**

C00144774

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152486**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. TATE AND LYLE PAC OF TATE AND LYLE INGREDIENTS AMERICAS**

Mailing Address 2200 E ELDORADO ST

City  
DECATUR

State  
IL

Zip Code  
62521-1578

FEC ID number of contributing  
federal political committee.

**C**

C00056564

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03** / **24** / **2016**

**Transaction ID : SA11.16155635**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

18500.00

**TOTAL** This Period (last page this line number only)..... ►

# **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)

PAGE 642 OF 923

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. TENET HEALTHCARE CORPORATION PAC**

Mailing Address 1445 ROSS AVENUE  
SUITE 1400

City  
DALLAS

State  
TX

Zip Code  
75202-2703

FEC ID number of contributing  
federal political committee.

**C** C00119354

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **07** / **2016**

**Transaction ID : SA11.16139393**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. TUESDAY GROUP PAC**

Mailing Address 209 PENNSYLVANIA AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-1107

FEC ID number of contributing  
federal political committee.

**C** C00433060

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155097**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. UNITEDHEALTH GROUP INC. PAC**

Mailing Address 701 PENNSYLVANIA AVE., NW  
SUITE 530

City

WASHINGTON

State

DC

Zip Code

20004-2608

FEC ID number of contributing  
federal political committee.

**C** C00274431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **08** / **2016**

**Transaction ID : SA11.16141859**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. VALERO ENERGY CORPORATION PAC**

Mailing Address 601 PENN AVE NW, SOUTH BUILDING, S

City  
WASHINGTON

State  
DC

Zip Code  
20004-

FEC ID number of contributing  
federal political committee.

**C**

C00109546

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA11.16152483**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. WELLS FARGO AND CO. EMPLOYEE PAC**

Mailing Address SIXTH AND MARQUETTE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55479-0001

FEC ID number of contributing  
federal political committee.

**C**

C00034595

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148269**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WENDY'S/ARBY'S GROUP PAC**

Mailing Address 4288 W. DUBLIN GRANVILLE ROAD

City  
DUBLIN

State  
OH

Zip Code  
43017-1442

FEC ID number of contributing  
federal political committee.

**C**

C00369090

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **11** / **2016**

**Transaction ID : SA11.16147278**

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

45000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 OF 923

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WHITE CASTLE PAC**

Mailing Address 555 WEST GOODALE STREET

City  
COLUMBUS

State  
OH

Zip Code  
43215-1104

FEC ID number of contributing  
federal political committee.

**C**

C00112623

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169780**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

**TOTAL** This Period (last page this line number only)..... ►

4833040.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BOEHNER FOR SPEAKER COMMITTEE**

Mailing Address 320 1ST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1838

FEC ID number of contributing  
federal political committee.

**C** C00478354

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21675.80

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16164549**

Amount of Each Receipt this Period

21675.80

☐ Memo Item

TRANSFER

DONORS PREVIOUSLY DISCLOSED TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DOTCHIN, ROBERT, J, MR.,**

Mailing Address 412 NORTH SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ADVOCACY GROUP

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.10001**

Amount of Each Receipt this Period

-4400.00

☒ Memo Item

CORRECTION OF ALLOCATION OF FUNDS

BOEHNER FOR SPEAKER JFC TRANSFER  
ALLOCATION CORRECTION - AGGREGATE FOR  
2015 LIMITS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BRADY VICTORY FUND**

Mailing Address PO BOX 8277

City  
THE WOODLANDS

State  
TX

Zip Code  
77387-8277

FEC ID number of contributing  
federal political committee.

**C** C00531285

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA12.16149121**

Amount of Each Receipt this Period

7500.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

29175.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOKS, BOB, , MR.,**

Mailing Address 1107 NORTH PITT STREET  
UNIT 2C

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ALPINE GROUP INC.

Occupation (for Individual)  
EXECUTIVE VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA12.16170776**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: BRADY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAMILTON, TOBY, , MR.,**

Mailing Address 8686 NEW TRAILS DRIVE, SUITE 100  
STE. 100

City  
THE WOODLANDS

State  
TX

Zip Code  
77381-1176

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
EMERUS

Occupation (for Individual)  
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA12.16170775**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: BRADY VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCCREA, MACKIE, , ,**

Mailing Address 1407 GOLF CANYON

City  
SAN ANTONIO

State  
TX

Zip Code  
78258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Energy Transfer Group

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**01 / 18 / 2016**

**Transaction ID : SA12.10003**

Amount of Each Receipt this Period

400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: BRADY VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. DARRELL ISSA VICTORY FUND**

Mailing Address 30151 TOMAS

City  
RANCHO SANTA MARGARITA

State  
CA

Zip Code  
92688-2125

FEC ID number of contributing  
federal political committee.

**C**

C00493528

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15306.65

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173736**

Amount of Each Receipt this Period

15306.65

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SOUKI, CHARIF, , MR.,**

Mailing Address 700 MILAM STREET  
SUITE 800

City  
HOUSTON

State  
TX

Zip Code  
77002-2835

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARIF-CHENIERE ENERGY, INC

Occupation (for Individual)  
CHAIRMAN/C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10400.00

Date of Receipt

**03** / **30** / **2016**

**Transaction ID : SA12.16173739**

Amount of Each Receipt this Period

10400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: DARRELL ISSA VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SWORTWOOD, DON, , MR.,**

Mailing Address 2563 CALLE DEL ORO

City  
LA JOLLA

State  
CA

Zip Code  
92037-2005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
WESTERN STATES INVESTMENT CORP.

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **16** / **2016**

**Transaction ID : SA12.16173737**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: DARRELL ISSA VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

15306.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAMER, SANDRA, , MRS.,**

Mailing Address 1736 W 28TH ST

City  
CORAL GABLES

State  
FL

Zip Code  
33143-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA12.16173738**

Amount of Each Receipt this Period

9600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: DARRELL ISSA VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARPER MAJORITY FUND**

Mailing Address PO BOX 80

City  
JACKSON

State  
MS

Zip Code  
39205-0080

FEC ID number of contributing  
federal political committee.

C C00494484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA12.16163289**

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, MICHAEL, E., MR.,**

Mailing Address PO BOX 12004

City  
JACKSON

State  
MS

Zip Code  
39236-2004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LANDMARK HOMES

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA12.16170777**

Amount of Each Receipt this Period

25000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: HARPER MAJORITY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. HOOSIERS VICTORY FUND**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENS

State  
GA

Zip Code  
30605-1332

FEC ID number of contributing  
federal political committee.

**C**

C00590901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16163288**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS -  
SOME DONORS PREVIOUSLY DISCLOSED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. LECHLEITER, JOHN, C., MR.,**

Mailing Address 1 N ILLINOIS ST. 2302

City  
INDIANAPOLIS

State  
IN

Zip Code  
46204-1935

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ELI LILLY & COMPANY

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 29 / 2016

**Transaction ID : SA12.16169839**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: HOOSIERS VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HUNTER VICTORY FUND**

Mailing Address PO BOX 26141

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-6141

FEC ID number of contributing  
federal political committee.

**C**

C00608158

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8527.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16164550**

Amount of Each Receipt this Period

8527.95

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►

12027.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEAL, JAMES, , MR.,**

Mailing Address 9756 LA JOLLA FARMS ROAD

City  
LA JOLLA

State  
CA

Zip Code  
92037-1133

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8600.00

Date of Receipt

**03 / 18 / 2016**

**Transaction ID : SA12.16173706**

Amount of Each Receipt this Period

8600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: HUNTER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JEB HENSARLING VICTORY FUND**

Mailing Address PO BOX 30844

City  
BETHESDA

State  
MD

Zip Code  
20824-0844

FEC ID number of contributing  
federal political committee.

**C** C00497669

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19206.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16163284**

Amount of Each Receipt this Period

19206.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITE, ALAN, , MR.,**

Mailing Address 2323 VICTORY AVENUE  
SUITE 1400

City  
DALLAS

State  
TX

Zip Code  
75219-7695

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

PLAINS CAPITAL

Occupation (for Individual)

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19800.00

Date of Receipt

**02 / 19 / 2016**

**Transaction ID : SA12.16169843**

Amount of Each Receipt this Period

19800.00

☒ Memo Item

TRANSFER

JFC ATTRIB: JEB HENSARLING VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19206.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MCCARTHY VICTORY FUND 2014**

Mailing Address PO BOX 30844

City  
BETHESDA

State  
MD

Zip Code  
20824-0844

FEC ID number of contributing  
federal political committee.

**C** C00541011

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

144357.98

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16163287**

Amount of Each Receipt this Period

141498.39

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. BARTON, KEN, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173722**

Amount of Each Receipt this Period

257.14

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BECKETT, KATHY, , MS.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.14

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173723**

Amount of Each Receipt this Period

257.14

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141498.39

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BREWER, SUSAN, , MS.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173724**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARSON, RUSSELL, L., MR.,**

Mailing Address 320 PARK AVENUE  
SUITE 25

City  
NEW YORK

State  
NY

Zip Code  
10022-6833

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELSH, CARSON, ANDERSON & STOW

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA12.16173716**

Amount of Each Receipt this Period

14600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CATSIMATIDIS, JOHN, , MR.,**

Mailing Address 817 5TH AVENUE

City  
NEW YORK

State  
NY

Zip Code  
10065-7254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RED APPLE

Occupation (for Individual)  
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

14600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173714**

Amount of Each Receipt this Period

14600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COKELEY, BRYAN, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173725**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COPELAND, GORDON, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173726**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DENICOLA, ANTHONY, J., MR.,**

Mailing Address 214 GREENRIDGE RD

City  
FRANKLIN LKS

State  
NJ

Zip Code  
07417-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELSH CARSON ANDERSON & STOWE CO.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA12.16173710**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DETTINGER, KURT, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORTState  
WVZip Code  
26330-4500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSONOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	04	/	2016

**Transaction ID : SA12.16173727**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEINGOLD, JEFFREY, P., DR.,**Mailing Address 200 W. CYPRESS CREEK ROAD  
SUITE 500City  
FORT LAUDERDALEState  
FLZip Code  
33309-2338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
M.C.N.A. DENTAL PLANSOccupation (for Individual)  
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2016

**Transaction ID : SA12.16173715**

Amount of Each Receipt this Period

14600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLANERY, SHARON, , MS.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORTState  
WVZip Code  
26330-4500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSONOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	04	/	2016

**Transaction ID : SA12.16173728**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLANNERY, DAVE, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORTState  
WVZip Code  
26330-4500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSONOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

**Transaction ID : SA12.16173729**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLUHARTY, BOB, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORTState  
WVZip Code  
26330-4500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSONOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

**Transaction ID : SA12.16173730**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, BRIAN, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORTState  
WVZip Code  
26330-4500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPTOE & JOHNSONOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

**Transaction ID : SA12.16173731**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
 TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAWRENCE, HANK, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173732**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MONTAG, THOMAS, K., MR.,**

Mailing Address 127 E. 73RD ST.

City  
NEW YORK

State  
NY

Zip Code  
10021-3502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BANK OF AMERICA MERRILL LYNCH

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA12.16173720**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RALEIGH, GREG, , DR.,**

Mailing Address 131 FOX HOLLOW ROAD

City  
WOODSIDE

State  
CA

Zip Code  
94062-3607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ITSON

Occupation (for Individual)  
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **01** / **2016**

**Transaction ID : SA12.16173717**

Amount of Each Receipt this Period

15000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCULLY, THOMAS, A., MR.,**

Mailing Address 1801 EDGEHILL DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ALSTON & BIRD LLP

Occupation (for Individual)

SENIOR COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA12.16173711**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLAUGHTER, CHRIS, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City

BRIDGEPORT

State

WV

Zip Code

26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

STEPTOE & JOHNSON

Occupation (for Individual)

PARTNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173733**

Amount of Each Receipt this Period

257.14

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STUART, MIKE, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City

BRIDGEPORT

State

WV

Zip Code

26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

STEPTOE & JOHNSON

Occupation (for Individual)

PARTNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

257.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA12.16173734**

Amount of Each Receipt this Period

257.14

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEST, KEVIN, , MR.,**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
STEPTOE & JOHNSON

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.14

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173735**

Amount of Each Receipt this Period

257.14

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CALIFORNIA FARM BUREAU FEDERATION FUND TO PROTECT THE FAMILY**

Mailing Address 2300 RIVER PLAZA DRIVE

City  
SACRAMENTO

State  
CA

Zip Code  
95833-4236

FEC ID number of contributing  
federal political committee.

**C** C00041954

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**03** / **11** / **2016**

**Transaction ID : SA12.16173713**

Amount of Each Receipt this Period

5000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORONGO BAND OF MISSION INDIANS NATIVE AMERICAN RIGHTS FUND**

Mailing Address 12700 PUMARRA ROAD

City  
BANNING

State  
CA

Zip Code  
92220-6977

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33300.00

Date of Receipt

**03** / **18** / **2016**

**Transaction ID : SA12.16173718**

Amount of Each Receipt this Period

33300.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 659 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PFIZER PAC**

Mailing Address 235 E 42ND ST

City  
NEW YORK

State  
NY

Zip Code  
10017-5703

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14500.00

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173712**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SALT RIVER PIMA-MARICOPA INDIAN**

Mailing Address 10005 E. OSBORN ROAD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85256-4019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA12.16173719**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STEPTOE & JOHNSON**

Mailing Address 400 WHITE OAKS BOULEVARD

City  
BRIDGEPORT

State  
WV

Zip Code  
26330-4500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

**03** / **04** / **2016**

**Transaction ID : SA12.16173721**

Amount of Each Receipt this Period

3600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY VICTORY FUND 2014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MCHENRY LEADERSHIP FUND**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-5404

FEC ID number of contributing  
federal political committee.

**C**

C00544650

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

32643.28

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16166467**

Amount of Each Receipt this Period

32643.28

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ALALA, JOE, , MR.,**

Mailing Address 4201 CONGRESS ST  
STE 360

City  
CHARLOTTE

State  
NC

Zip Code  
28209-4636

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAPITALA HOLDINGS LLC

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**02** / **01** / **2016**

**Transaction ID : SA12.16170772**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCHENRY LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HIPPI, VAN, D., MR., JR.**

Mailing Address 809 N. QUAKER LANE

City  
ALEXANDRIA

State  
VA

Zip Code  
22302-3416

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
AMERICAN DEFENSE INTL, INC.

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **28** / **2016**

**Transaction ID : SA12.16170774**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCHENRY LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

32643.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNOVAL, MATHIAS, , ,**

Mailing Address 501 MINUET LANE

City  
CHARLOTTE

State  
NC

Zip Code  
28217-2767

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4900.00

Date of Receipt

**03 / 20 / 2016**

**Transaction ID : SA12.16170773**

Amount of Each Receipt this Period

4900.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCHENRY LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAPITALA HOLDINGS LLC**

Mailing Address 4201 CONGRESS ST  
STE 360

City  
CHARLOTTE

State  
NC

Zip Code  
28209-4636

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**02 / 01 / 2016**

**Transaction ID : SA12.16170771**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCHENRY LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NUNES VICTORY FUND**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290-6545

FEC ID number of contributing  
federal political committee.

**C** C00544031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

18028.82

Date of Receipt

**03 / 04 / 2016**

**Transaction ID : SA12.16149559**

Amount of Each Receipt this Period

18028.82

☐ Memo Item

TRANSFER

DONORS PREVIOUSLY DISCLOSED TRANSFER OF  
JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18028.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PRICE FREEDOM FUND**

Mailing Address 2700 CUMBERLAND PKWY  
#150

City  
ATLANTA

State  
GA

Zip Code  
30339-3321

FEC ID number of contributing  
federal political committee.

**C**

C00459529

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18877.30

Date of Receipt

**03 / 23 / 2016**

**Transaction ID : SA12.16163283**

Amount of Each Receipt this Period

18877.30

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JACKSON, RICHARD, L., MR.,**

Mailing Address 2655 NORTHWINDS PARKWAY

City

ALPHARETTA

State

GA

Zip Code

30009-2280

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JACKSON HEALTHCARE INC.

Occupation (for Individual)  
CHAIRMAN/C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14600.00

Date of Receipt

**01 / 11 / 2016**

**Transaction ID : SA12.16167713**

Amount of Each Receipt this Period

14600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PRICE FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WINCHESTER, J., GREGORY, MR.,**

Mailing Address 16035 WESTBROOK RD

City

MILTON

State

GA

Zip Code

30004-2887

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TRIMONT

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7300.00

Date of Receipt

**01 / 21 / 2016**

**Transaction ID : SA12.16167714**

Amount of Each Receipt this Period

7300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: PRICE FREEDOM FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

18877.30

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. RODNEY FRELINGHUYSEN VICTORY FUND**

Mailing Address 228 S WASHINGTON ST

City

ALEXANDRIA

State

VA

Zip Code

22314-5408

FEC ID number of contributing  
federal political committee.

**C**

C00591909

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26367.62

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16169840**

Amount of Each Receipt this Period

26367.62

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MAROTTA, PATRICK, A., MR.,**

Mailing Address P.O. BOX 1061

MORRISTOWN

City

NJ

State

79

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MAROTTA CONTROLS, INC.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16169842**

Amount of Each Receipt this Period

600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RODNEY FRELINGHUYSEN VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. POLLOCK, JONATHAN, D., MR.,**

Mailing Address 40 W. 57TH STREET

City

NEW YORK

State

NY

Zip Code

10019-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ELLIOTT MANAGEMENT

Occupation (for Individual)  
CO-CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 01 / 2016**

**Transaction ID : SA12.16169841**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RODNEY FRELINGHUYSEN VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

26367.62

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENSState  
GAZip Code  
30605-1332FEC ID number of contributing  
federal political committee.

C

C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343754.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16164551

Amount of Each Receipt this Period

282409.43

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAXTER, FRANK, E., ,**

Mailing Address 1100 SANTA MONICA BLVD STE 1200

City

LOS ANGELES

State

CA

Zip Code

90025-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA12.16164577

Amount of Each Receipt this Period

11600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BELL-CAHILL, LAUREL, V., ,**

Mailing Address 3510 WINDING CREEK RD

City

SACRAMENTO

State

CA

Zip Code

95864-1529

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA12.16164575

Amount of Each Receipt this Period

150.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

SUBTOTAL of Receipts This Page (optional)..... ►

282409.43

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 665 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHANDI, NACHHATTAR, S., ,**

Mailing Address 42270 SPECTRUM ST

City  
INDIO

State  
CA

Zip Code  
92203-9513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHANDI GROUP

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164581**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, JOHN, J., ,**

Mailing Address 1 MARITIME PLZ STE 1400

City

SAN FRANCISCO

State

CA

Zip Code

94111-3504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PISCES INC

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA12.16164590**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FU, YIYAN, , ,**

Mailing Address 1417 ST ALBANS RD

City

SAN MARINO

State

CA

Zip Code

91108-1862

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
FMF INVESTMENTS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164578**

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 666 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARMON, MARTIN, A., MR.,**

Mailing Address 4020 SIERRA COLLEGE BOULEVARD  
SUITE 200

City  
ROCKLIN

State  
CA

Zip Code  
95677-3906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AUBURN MANOR HOLDING CORPORATION

Occupation (for Individual)

BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA12.16164584

Amount of Each Receipt this Period

29200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAVNER, RONALD, I., ,**

Mailing Address 2275 CHAUCER RD

City

SAN MARINO

State

CA

Zip Code

91108-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PUBLIC STORAGE INC

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA12.16164580

Amount of Each Receipt this Period

11600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HITCHCOCK, FREDERICK, , ,**

Mailing Address 9101 ACTA DR. #1702

City

LAS VEGAS

State

NV

Zip Code

89145-8545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AUTO DEALERZ

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA12.16164589

Amount of Each Receipt this Period

12600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOVACEVICH, RICHARD, M., MR.,**

Mailing Address 420 MONTGOMERY ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94104-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELLS FARGO

Occupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA12.16164572**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NICHOLS, NIKKI, , ,**

Mailing Address P.O. BOX 8610

City  
ROWLAND HEIGHTS

State  
CA

Zip Code  
91748-0610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HITCHCOCK AUTOMOTIVE

Occupation (for Individual)  
TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA12.16164588**

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBERNDORF, WILLIAM, E., MR.,**

Mailing Address 615 FRONT ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94111-1913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPO PARTNERS

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : SA12.16164576**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PARKS, JAMES, R., MR.,**

Mailing Address 10474 SANTA MONICA BLVD.  
SUITE 200

City  
LOS ANGELES

State  
CA

Zip Code  
90025-6930

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CBIZ MHM LLC

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164587**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWAB, CHARLES, R., MR.,**

Mailing Address PO BOX 192861

City  
SAN FRANCISCO

State  
CA

Zip Code  
94119-2861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARLES SCHWAB & COMPANY INC.

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164573**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCRIVNER, DOUGLAS, G., ,**

Mailing Address 25461 W FREEMONT RD

City  
LOS ALTOS HILLS

State  
CA

Zip Code  
94022-3538

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 ▼

33400.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164582**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 669 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIGAL, SANDY, , ,

Mailing Address 5850 CANOGA AVE

City  
WOODLAND HILLSState  
CAZip Code  
91367-6505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW MARK MERRILLOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : SA12.16164591

Amount of Each Receipt this Period

11600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPANOS, ALEX, G., MR.,

Mailing Address 1341 W ROBINHOOD DRIVE  
5TH FLOORCity  
STOCKTONState  
CAZip Code  
95207-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
A.G. SPANOS CO.Occupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : SA12.16164571

Amount of Each Receipt this Period

9200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEINHARDT, DEBRA, J., ,

Mailing Address 17732 MELVIN LN

City  
NORTHRIDGEState  
CAZip Code  
91325-3100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HYDRO SYSTEMOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

Transaction ID : SA12.16164579

Amount of Each Receipt this Period

6200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 670 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STERN, MARC, I., MR.,**

Mailing Address 23700 MALIBU COLONY ROAD

City  
MALIBU

State  
CA

Zip Code  
90265-6629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE TCW GROUP, INC.

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164586**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WENDT, LISA, , ,**

Mailing Address 1 MUIR LOOP

City  
SAN FRANCISCO

State  
CA

Zip Code  
94129-1123

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164574**

Amount of Each Receipt this Period

4200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSEY, DIANE, B., ,**

Mailing Address 2590 JACKSON ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94115-1121

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
A WILSEY PROPERTIES CO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 21 / 2016**

**Transaction ID : SA12.16164585**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 671 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALIFORNIA FARM BUREAU FEDERATION FUND TO PROTECT THE FAMILY**

Mailing Address 2300 RIVER PLAZA DRIVE

City  
SACRAMENTOState  
CAZip Code  
95833-4236FEC ID number of contributing  
federal political committee.**C** C00041954

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

**Transaction ID : SA12.16164583**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RYAN-MCCARTHY VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENSState  
GAZip Code  
30605-1332FEC ID number of contributing  
federal political committee.**C** C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343754.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16164555**

Amount of Each Receipt this Period

61344.58

☐ Memo Item

TRANSFER

DONORS DISCLOSED ON OTHER TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCALISE LEADERSHIP FUND**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00568162

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54728.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16166466**

Amount of Each Receipt this Period

37539.08

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98883.66



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 672 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GUINDON, KEITH, , MR.,**

Mailing Address 1902 WHARF RD

City  
GALVESTON

State  
TX

Zip Code  
77550-1652

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
KATIE'S SEAFOOD

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10075.00

Date of Receipt

**03 / 14 / 2016**

**Transaction ID : SA12.16167706**

Amount of Each Receipt this Period

5475.00

☒ Memo Item

TRANSFER

JFC ATTRIB: SCALISE LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEEBE, FREDERICK, , MR.,**

Mailing Address 5531 ST CHARLES AVE

City  
NEW ORLEANS

State  
LA

Zip Code  
70115-5047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**03 / 29 / 2016**

**Transaction ID : SA12.16167704**

Amount of Each Receipt this Period

20000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: SCALISE LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERSON, MICHAEL, H., MR.,**

Mailing Address 8709 BURNING TREE RD.

City  
BETHESDA

State  
MD

Zip Code  
20817-3054

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
AMERICAN DEFENSE INTERNATIONAL

Occupation (for Individual)  
GOVERNMENT AFFAIRS CONSULTAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03 / 17 / 2016**

**Transaction ID : SA12.16167707**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: SCALISE LEADERSHIP FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HIPP, VAN, D., MR., JR.

Mailing Address 809 N. QUAKER LANE

City  
ALEXANDRIAState  
VAZip Code  
22302-3416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN DEFENSE INTL, INC.Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2016

Transaction ID : SA12.16167708

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: SCALISE LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILNE, JOHN, D., MR.,

Mailing Address 409 G STREET SE  
SUITE 210, SOUTH BUILDINGCity  
WASHINGTONState  
DCZip Code  
20003-4257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCAPITOL MANAGEMENTOccupation (for Individual)  
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : SA12.16167705

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: SCALISE LEADERSHIP FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH VICTORY

Mailing Address 2470 DANIELS BRIDGE RD

City  
ATHENSState  
GAZip Code  
30606-6187FEC ID number of contributing  
federal political committee.

C C00573436

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

52441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173761

Amount of Each Receipt this Period

19208.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

19208.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINQUEFIELD, REX, A., MR.,**

Mailing Address 9 HORTENSE PLACE

City  
ST. LOUIS

State  
MO

Zip Code  
63108-1207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SHOW ME INSTITUTE

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173762**

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: SMITH VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEAM RYAN**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENS

State  
GA

Zip Code  
30605-1332

FEC ID number of contributing  
federal political committee.

**C** C00545947

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4327045.69

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16164544**

Amount of Each Receipt this Period

1882782.66

☐ Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ACHTMAYER, WILLIAM, F., MR.,**

Mailing Address 34 1/2 BEACON ST  
APT. 4N

City  
BOSTON

State  
MA

Zip Code  
02108-1423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE PARTHENON GROUP

Occupation (for Individual)  
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173639**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1882782.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 675 OF 923  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALLISON, KEITH, , ,**

Mailing Address P.O. BOX 36158

City  
FAYETTEVILLEState  
NCZip Code  
28303-1158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SYSTEL BUSINESS EQUIPMENT CO INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173648**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDREESSEN, MARC, LOWELL, MR.,**

Mailing Address P.O. BOX 1707

City  
LOS ALTOSState  
CAZip Code  
94023-1707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANDREESSEN HOROWITZOccupation (for Individual)  
CO-FOUNDER AND PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173552**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANSCHUTZ, PHILIP, F., MR.,**Mailing Address 555 17TH STREET  
SUITE 2400City  
DENVERState  
COZip Code  
80202-3941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE ANSCHUTZ CORPORATIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173553**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ARTHUR, THOMAS, B., MR.,

Mailing Address 1700 S MACDILL AVE  
STE. 340

City  
TAMPA

State  
FL

Zip Code  
33629-5244

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173605

Amount of Each Receipt this Period

5000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BACARDI, FACUNDO, L., MR.,

Mailing Address 4975 PINE DRIVE

City  
MIAMI

State  
FL

Zip Code  
33143-8518

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BACARDI LIMITED

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173595

Amount of Each Receipt this Period

9600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BACARDI, JOAQUIN, E., ,

Mailing Address 81 VIAJERA ST

City  
GUAYNABO

State  
PR

Zip Code  
00969-5810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BACARDI GROUP

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173675

Amount of Each Receipt this Period

5000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BACARDI, JOAQUIN, E., ,**

Mailing Address 81 VIAJERA ST

City  
GUAYNABO

State  
PR

Zip Code  
00969-5810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BACARDI GROUP

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173676**

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BACHELDER, CHRIS, , MR.,**

Mailing Address 1194 BROOKGATE WAY NE

City  
ATLANTA

State  
GA

Zip Code  
30319-2877

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HILLSDALE COLLEGE

Occupation (for Individual)  
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173624**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BALL, ALLEN, , ,**

Mailing Address P.O. BOX 51298

City  
IDAHO FALLS

State  
ID

Zip Code  
83405-1298

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BALL VENTURES LLC

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173629**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 678 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARNETT, HOYT, R., ,

Mailing Address 8515 LIVE OAK RD

City  
LAKELANDState  
FLZip Code  
33813-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUBLIX SUPERMARKETS INC.Occupation (for Individual)  
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173585

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARNETT, HOYT, R., ,

Mailing Address 8515 LIVE OAK RD

City  
LAKELANDState  
FLZip Code  
33813-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUBLIX SUPERMARKETS INC.Occupation (for Individual)  
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173593

Amount of Each Receipt this Period

13800.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BASS, JEFFREY, S., ,

Mailing Address 46 SW 1ST ST STE 300

City  
MIAMIState  
FLZip Code  
33130-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHUBIN & BASS PAOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173606

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAUM, DAVID, , ,**

Mailing Address P.O. BOX 117

City  
JANESVILLEState  
WIZip Code  
53547-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SSI TECHNOLOGIES, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16173700**

Amount of Each Receipt this Period

2700.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAUM, DAVID, , ,**

Mailing Address P.O. BOX 117

City  
JANESVILLEState  
WIZip Code  
53547-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SSI TECHNOLOGIES, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16173705**

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOSSIDY, LAWRENCE, A., ,**

Mailing Address 452 W MOUNTAIN RD

City  
RIDGEFIELDState  
CTZip Code  
06877-2926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16173557**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADY, TRAVIS, , ,**

Mailing Address 25 RIDGE BLOSSOM RD

City  
LAS VEGAS

State  
NV

Zip Code  
89135-3284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BRADY INDUSTRIES

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173650**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAFARO, JANET, S., MS.,**

Mailing Address 600 WARNER ROAD

City  
HUBBARD

State  
OH

Zip Code  
44425-2729

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SILCOR OULFIED SERVICES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173674**

Amount of Each Receipt this Period

2100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARRERA-JUSTIZ, FRANCISCO, , ,**

Mailing Address 4301 SANTA MARIA ST

City  
CORAL GABLES

State  
FL

Zip Code  
33146-1126

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BACARDI LIMITED

Occupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173607**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLYDE, ANDREW, S., CDR,**

Mailing Address 4800 ATLANTA HWY

City  
BOGART

State  
GA

Zip Code  
30606-0713

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CLYDE ARMORY

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173625**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CODINA, ARMANDO, , ,**

Mailing Address 50 CASUARINA CONCOURSE

City  
CORAL GABLES

State  
FL

Zip Code  
33143-6510

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CODINA PARTNERS LLC

Occupation (for Individual)  
EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173608**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COMAN, GAVIN, , MR.,**

Mailing Address 28 FERRY LN E

City  
WESTPORT

State  
CT

Zip Code  
06880-6030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BANK OF AMERICA

Occupation (for Individual)  
MANAGING DIRECTOR - GLOBAL FX

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173560**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONARD, EDWARD, W., ,**

Mailing Address 1324 LEXINGTON AVE, BOX 109

City  
NEW YORK

State  
NY

Zip Code  
10128-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173651**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COOLEY, CLAY, , MR.,**

Mailing Address 1500 I-20 WEST

City  
ARLINGTON

State  
TX

Zip Code  
76017-5838

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLAY COOLEY INVESTMENTS

Occupation (for Individual)  
SELF - AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173687**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COPELAND, GERRET, , ,**

Mailing Address 242 SOUTH WASHINGTON BLVD

City  
SARASOTA

State  
FL

Zip Code  
34236-6943

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173596**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 683 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORNELL, HENRY, , MR.,**

Mailing Address 116 E. 80TH STREET

City  
NEW YORKState  
NYZip Code  
10075-0306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOLDMAN SACH & CO.Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173654

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COX, CHRISTOPHER, C., MR.,**Mailing Address 2205 WINDSOR ROAD  
WASHINGTON DC 20001City  
ALEXANDRIAState  
VAZip Code  
22307-1019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NAVIGATORSOccupation (for Individual)  
SENIOR PRINCIPAL OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173694

Amount of Each Receipt this Period

7600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COX, HOWARD, , ,**

Mailing Address 200 SEAPORT BLVD

City  
BOSTONState  
MAZip Code  
02210-2031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173641

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRY, RAVENEL, , ,**

Mailing Address 435 E 52ND ST

City  
NEW YORK

State  
NY

Zip Code  
10022-6445

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EAGLE CAPITAL MANAGEMENT

Occupation (for Individual)  
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173655**

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DANGUILLECOURT, ADOLFO, L., ,**

Mailing Address 4835 HAMMOCK LAKE DR.

City  
MIAMI

State  
FL

Zip Code  
33156-2217

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 ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173609**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DE HECHAVARRIA, PAUL, M., ,**

Mailing Address 12305 SW 38TH ST

City  
OCALA

State  
FL

Zip Code  
34481-8110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
HORSE BREEDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173610**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 685 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEMPSEY, KAY, , ,**

Mailing Address 2951 PIEDMONT RD STE 200  
SUITE 200

City  
ATLANTA

State  
GA

Zip Code  
30305-2787

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 ▼

1350.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173628**

Amount of Each Receipt this Period

1350.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DICKE, JAMES, F., MR., II**

Mailing Address 422 EASTHAVEN DR.

City

NEW BREMEN

State

OH

Zip Code

45869-1210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CROWN EQUIPMENT CORP.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173672**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DICKE, JAMES, F., ,**

Mailing Address 422 EASTHAVEN DR.

City

NEW BREMEN

State

OH

Zip Code

45869-1210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CROWN EQUIPMENT

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13800.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173673**

Amount of Each Receipt this Period

13800.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIMARE, PAUL, J., MR.,**

Mailing Address PO BOX 900460

City  
HOMESTEAD

State  
FL

Zip Code  
33090-0460

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DIMARE FRESH

Occupation (for Individual)  
FARMER & OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173611**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DION, STACEY, A., MS.,**

Mailing Address 238 12TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1428

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE BOEING COMPANY

Occupation (for Individual)  
VP, CORPORATE PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173572**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DORION, GEORGE, H., ,**

Mailing Address 7922 HUNTERS GROVE RD

City  
JACKSONVILLE

State  
FL

Zip Code  
32256-7216

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 ▼

2100.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173615**

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWD, RODDEY, , ,**

Mailing Address P.O. BOX 35430

City  
CHARLOTTE

State  
NC

Zip Code  
28235-5430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLOTTE PIPE AND FOUNDRY

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173649**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRUCKENMILLER, STANLEY, F., MR.,**

Mailing Address 40 WEST 57TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10019-4001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUQUESNE FAMILY OFFICE LLC

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173652**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESHELMAN, FRED, N., DR.,**

Mailing Address 319 N 3RD ST STE 301

City  
WILMINGTON

State  
NC

Zip Code  
28401-4251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ESHelman VENTURES LLC

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173646**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 688 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAISON, JAY, W., MR.,**

Mailing Address 1355 GREENWOOD CLIFF DR STE 301

City  
CHARLOTTE

State  
NC

Zip Code  
28204-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ZOBO TV

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173645**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALIC, DEBBIE, , ,**

Mailing Address 6100 HOLLYWOOD BLVD, 7TH FLOOR

City  
HOLLYWOOD

State  
FL

Zip Code  
33024-7983

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173597**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALIC, GILA, , ,**

Mailing Address 145 BISCAY DR.

City  
BAL HARBOUR

State  
FL

Zip Code  
33154-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173598**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FALIC, JANA, , MRS.,**

Mailing Address 150 HARBOUR WAY

City

BAL HARBOUR

State

FL

Zip Code

33154-1333

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173599**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FALIC, JEROME, , ,**

Mailing Address 6100 HOLLYWOOD BLVD, 7TH FLOOR

City

HOLLYWOOD

State

FL

Zip Code

33024-7983

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

DUTY FREE AMERICAS INC

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173600**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FALIC, LEON, , MR.,**

Mailing Address 6100 HOLLYWOOD BOULEVARD  
7TH FLOOR

City

HOLLYWOOD

State

FL

Zip Code

33024-7983

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

DUTY FREE AMERICAS

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173601**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FALIC, NILY, , ,

Mailing Address 9999 COLLINS AVE

City

BAL HARBOUR

State

FL

Zip Code

33154-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173612

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FALIC, SIMON, , MR.,

Mailing Address 150 HARBOUR WAY

City

BAL HARBOUR

State

FL

Zip Code

33154-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DUTY FREE AMERICAS

Occupation (for Individual)

CHAIRMAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173602

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARMER, JOYCE, E., MRS.,

Mailing Address 8525 FOX CLUB LANE

City

CINCINNATI

State

OH

Zip Code

45243-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173669

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARMER, RICHARD, T., MR.,**

Mailing Address 8525 FOX CUB LANE  
SUITE 120

City  
CINCINNATI

State  
OH

Zip Code  
45243-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CINTAS CORPORATION

Occupation (for Individual)  
CHAIRMAN EMERITUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173670**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FASCITELLI, MICHAEL, D., ,**

Mailing Address 888 7TH AVE 27TH FL

City  
NEW YORK

State  
NY

Zip Code  
10106-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173656**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAULHABER, PING, PAN, ,**

Mailing Address 14881 EVERGREEN AVE

City  
CLEARWATER

State  
FL

Zip Code  
33762-3008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICRO MO ELECTRONICS INC

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173613**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOGLIA, PATRICIA, A., MRS.,**

Mailing Address 43 CASTLETON COURT

City  
NORTH BARRINGTON

State  
IL

Zip Code  
60010-6930

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173635**

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOSTER, PAUL, L., MR.,**

Mailing Address 123 W MILLS AVE STE 600  
SUITE 200

City  
EL PASO

State  
TX

Zip Code  
79901-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN REFINING COMPANY

Occupation (for Individual)  
CHAIRMAN AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173680**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEIER, PHILIP, H., ,**

Mailing Address 70 E 55TH ST 15TH FL

City  
NEW YORK

State  
NY

Zip Code  
10022-3386

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 ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173666**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLS, JAMES, P., DR., JR.**

Mailing Address P.O. BOX 5000

City  
TARPON SPRINGS

State  
FL

Zip Code  
34688-5000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ST. LUKE'S CATARACT & LASER INST.

Occupation (for Individual)  
CATARACT EYE SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173586**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIULIANI, RUDOLPH, W., ,**

Mailing Address 5 TIMES SQUARE, GIULIANI PARTNERS

City  
NEW YORK

State  
NY

Zip Code  
10036-6527

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GREENBERG TRAURIG

Occupation (for Individual)  
SENIOR ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173663**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLDMAN, MARC, , ,**

Mailing Address 1500 S OCEAN BLVD APT 501

City  
BOCA RATON

State  
FL

Zip Code  
33432-8523

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 ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173587**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOODNIGHT, JAMES, H., MR.,**

Mailing Address 900 APPLETREE LN.

City  
CARY

State  
NC

Zip Code  
27513-3000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SAS INSTITUTE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173647**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRAINGER, DAVID, W., MR.,**

Mailing Address 867 PEMBRIDGE DR

City

LAKE FOREST

State

IL

Zip Code

60045-4202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
W W GRAINGER INC.

Occupation (for Individual)  
SR. CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173637**

Amount of Each Receipt this Period

2600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANDE, RICHARD, L., ,**

Mailing Address 19 WIGET ST, APT 205

City

BOSTON

State

MA

Zip Code

02113-2253

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MORGAN STANLEY SMITH BARNEY LLC

Occupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173643**

Amount of Each Receipt this Period

600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 695 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAMMER, MARY, LYN, MS.,**

Mailing Address 5240 E CALLE VENTURA

City  
PHOENIX

State  
AZ

Zip Code  
85018-4406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHAMPION COLLEGE SERVICES

Occupation (for Individual)  
HIGHER EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173550**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HERRO, DAVID, G., MR.,**

Mailing Address 65 E. GOETHE STREET, APT. 3W

City  
CHICAGO

State  
IL

Zip Code  
60610-7260

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HARRIS ASSOCIATES, LP

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173631**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HILL, CHARLES, H., ,**

Mailing Address 34 MERRY LN

City  
WESTON

State  
CT

Zip Code  
06883-1220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZER

Occupation (for Individual)  
HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173563**

Amount of Each Receipt this Period

2100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOB, CHARLES, R., MR.,

Mailing Address 923 N 290 E

City  
AMERICAN FORK

State  
UT

Zip Code  
84003-3202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173692

Amount of Each Receipt this Period

50.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAFFEE, RICHARD, M., ,

Mailing Address 410 N. MICHIGAN AVENUE

City  
CHICAGO

State  
IL

Zip Code  
60611-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173636

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JECKERING, THOMAS, E., MR.,

Mailing Address 7720 MAYFIELD ROAD

City  
GATES MILLS

State  
OH

Zip Code  
44040-8601

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 ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173671

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JEDREY, CHRISTOPHER, M., MR.,

Mailing Address 28 STATE ST 34TH FL

City  
BOSTONState  
MAZip Code  
02109-5726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCDERMOTT WILL & EMERYOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173642

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENKINS, DAVID, , MR.,

Mailing Address 1801 CENTURY PARK E #1010

City  
LOS ANGELESState  
CAZip Code  
90067-2312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173551

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENKINS, HOWARD, M., MR.,

Mailing Address 5412 LYKES LANE

City  
TAMPAState  
FLZip Code  
33611-4747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

22200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173584

Amount of Each Receipt this Period

22200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JENKINS, PATRICIA, L., MRS.,

Mailing Address 5412 LYKES LANE

City  
TAMPAState  
FLZip Code  
33611-4747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173588

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENKINS, ROBERT, H., ,

Mailing Address 9310 N UPPER RIVER ROAD

City

RIVER HILLS

State

WI

Zip Code

53217-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173702

Amount of Each Receipt this Period

2200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, ANN, L., ,

Mailing Address 703 ISLAND DRIVE

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173576

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, CHARLES, B., ,

Mailing Address 703 ISLAND DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRANKLIN RESOURCESOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173577

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, RADY, A., ,

Mailing Address 31 RED COAT RD

City  
WESTPORTState  
CTZip Code  
06880-1411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZEROccupation (for Individual)  
CHIEF COMPLIANCE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173565

Amount of Each Receipt this Period

1100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, KENNETH, P., MR.,

Mailing Address 100 N TAMPA ST #4000

City  
TAMPAState  
FLZip Code  
33602-3615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYHOLE PARTNERS LLCOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

31800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173580

Amount of Each Receipt this Period

31800.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KADRE, MANUEL, , MR.,**

Mailing Address 5345 HAMMOCK DR

City  
CORAL GABLES

State  
FL

Zip Code  
33156-2103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MANUEL KADRE P.A.

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173614**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANE, STANLEY, B., MR.,**

Mailing Address 1 SOUTH SCHOOL AVENUE  
SUITE 401

City  
SARASOTA

State  
FL

Zip Code  
34237-6052

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 ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173589**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEISER, MICHAEL, L., MR.,**

Mailing Address 2450 N LAKEVIEW AVE  
SUITE 3920

City  
CHICAGO

State  
IL

Zip Code  
60614-2878

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
R.P.G., INC.

Occupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173632**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUEHNE, CARL, W., MR.,**

Mailing Address 4479 HERITAGE HTS

City  
DE PERE

State  
WI

Zip Code  
54115-9254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CK HOLDINGS, LLC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173701**

Amount of Each Receipt this Period

2400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUHN, THOMAS, R., MR.,**

Mailing Address 7101 SAUNDERS COURT

City  
WEST BETHESDA

State  
MD

Zip Code  
20817-4102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDISON ELECTRIC INSTITUTE

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173644**

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LANGONE, KEN, G., MR.,**

Mailing Address 375 PARK AVENUE

City  
NEW YORK

State  
NY

Zip Code  
10152-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INVEMED

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173662**

Amount of Each Receipt this Period

13800.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUDER, LEONARD, A., ,**

Mailing Address 767 5TH AVE 40TH FL

City  
NEW YORK

State  
NY

Zip Code  
10153-0003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE ESTEE LAUDER COMPANIES INC

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173667**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEVY, LEORA, R., MS.,**

Mailing Address 59 PECKSLAND ROAD

City  
GREENWICH

State  
CT

Zip Code  
06831-3711

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 ▼

11250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173559**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVY, LEORA, R., MS.,**

Mailing Address 59 PECKSLAND ROAD

City  
GREENWICH

State  
CT

Zip Code  
06831-3711

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 ▼

11250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173566**

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LONG, MICKEY, , ,

Mailing Address P.O. BOX 1270

City  
MIDLANDState  
TXZip Code  
79702-1270FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTEX WELL SERVICESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173685

Amount of Each Receipt this Period

10000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, MICKEY, , ,

Mailing Address P.O. BOX 1270

City  
MIDLANDState  
TXZip Code  
79702-1270FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTEX WELL SERVICESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173688

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LONG, RYAN, , ,

Mailing Address 16 S. LEXINGTON ST.

City  
ARLINGTONState  
VAZip Code  
22204-1145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BGR GROUPOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173698

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 704 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYNCH, DAVID, J., ,

Mailing Address 2300 BROWNS LAKE DRIVE

City  
BURLINGTONState  
WIZip Code  
53105-7105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LYNCH CHEVROLETOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173703

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARCUS, BERNARD, , MR.,

Mailing Address 1266 WEST PACES FERRY ROAD, #615

City  
ATLANTAState  
GAZip Code  
30327-2306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE MARCUS FOUNDATIONOccupation (for Individual)  
PHILANTHROPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173620

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARCUS, WILMA, , MRS.,

Mailing Address 7179 AYRSHIRE LN

City  
BOCA RATONState  
FLZip Code  
33496-1419FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173578

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 705 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHENY, DAVID, , MR.,**

Mailing Address 1613 SIENNA DR.

City  
CEDAR PARK

State  
TX

Zip Code  
78613-4061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SILENCER SHOP

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173689**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MATTOON, DANIEL, JAMES, MR.,**

Mailing Address 6344 CAVALIER CORRIDOR

City  
FALLS CHURCH

State  
VA

Zip Code  
22044-1203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATTOON & ASSOCIATES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173697**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGIVERN, TIM, , ,**

Mailing Address 1335 R ST NW #2

City  
WASHINGTON

State  
DC

Zip Code  
20009-4322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OGILVY GOVERNMENT RELATIONS

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173573**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 706 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCINERNEY, THOMAS, E., MR. ,

Mailing Address 274 RIVERSIDE AVE # 2A

City  
WESTPORTState  
CTZip Code  
06880-4823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUFF POINT ASSOCIATESOccupation (for Individual)  
CO-FOUNDER AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173554

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCLANE, P., ANDREWS, MR.,

Mailing Address 77 DEAN ROAD

City  
WESTONState  
MAZip Code  
02493-2709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TA ASSOCIATES, INC.Occupation (for Individual)  
SENIOR ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173640

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCNAIR, JANICE, S., MRS.,

Mailing Address 1807 RIVER OAKS BLVD.

City  
HOUSTONState  
TXZip Code  
77019-3109FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173681

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCNAIR, ROBERT, C., MR., SR.

Mailing Address TWO RELIANT PARK

City  
HOUSTONState  
TXZip Code  
77054-1573FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE HOUSTON TEXANSOccupation (for Individual)  
CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173682

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, JAMES, B., ,

Mailing Address 1956 RIVER FOREST DR. NW

City  
ATLANTAState  
GAZip Code  
30327-2522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIDELITYOccupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173626

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILTON, NILDA, , ,

Mailing Address 3211 PONCE DE LEON BLVD STE 301

City  
CORAL GABLESState  
FLZip Code  
33134-7274FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173616

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORAN, MICHAEL, E., ,**

Mailing Address 9360 SW 59TH AVE

City  
PINECREST

State  
FL

Zip Code  
33156-2032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BROCKWAY MORAN & PARTNERS

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173603**

Amount of Each Receipt this Period

9600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORE, ANAND, , ,**

Mailing Address 30 W 61ST ST APT 26A

City  
NEW YORK

State  
NY

Zip Code  
10023-7614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BROOKSIDE CAPITAL

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7100.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173664**

Amount of Each Receipt this Period

7100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOUJAIM, MIRNA, B., ,**

Mailing Address 326 MANSFIELD AVE

City  
DARIEN

State  
CT

Zip Code  
06820-2110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GUGGENHEIM SECURITIES

Occupation (for Individual)  
SENIOR MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173561**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 709 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOVAK, DAVID, C., ,**

Mailing Address 11658 TURTLE BEACH RD

City  
N. PALM BEACH

State  
FL

Zip Code  
33408-3347

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YUM BRANDS

Occupation (for Individual)  
EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173590**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORTIZ, JAVIER, , MR.,**

Mailing Address 2870 PEACHTREE RD. NW

City  
ATLANTA

State  
GA

Zip Code  
30305-2918

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 ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173627**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PASCUCCI, MICHAEL, C., MR.,**

Mailing Address 392 DUCK POND ROAD

City  
LOCUST VALLEY

State  
NY

Zip Code  
11560-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUCK POND CORPORATION

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173657**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRICE, STEVEN, , MR.,**

Mailing Address 15 HEATHCOTE RD

City  
SCARSDALE

State  
NY

Zip Code  
10583-4415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPECTRUM EQUITY INVESTORS

Occupation (for Individual)  
GENERAL PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173658**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAFFANIELLO, PATRICK, , ,**

Mailing Address 325 7TH ST NW STE 400

City  
WASHINGTON

State  
DC

Zip Code  
20004-2834

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173575**

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RANGOS, JOHN, G., MR., SR.**

Mailing Address 701 OSPREY POINT CIRCLE

City  
BOCA RATON

State  
FL

Zip Code  
33431-5245

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 ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173582**

Amount of Each Receipt this Period

28398.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 711 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. READ, IAN, C., MR.,

Mailing Address 235 EAST 42ND STREET

City  
NEW YORK

State  
NY

Zip Code  
10017-5703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZER

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173653

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REEVES, SAMUEL, T., MR.,

Mailing Address 12167 TURTLE BEACH ROAD

City  
NORTH PALM BEACH

State  
FL

Zip Code  
33408-2940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PINNACLE TRADING LLC

Occupation (for Individual)  
TRADER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173591

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REIBEL, JAY, , ,

Mailing Address 42 DOUBLING ROAD

City  
GREENWICH

State  
CT

Zip Code  
06830-4859

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 ▼

33400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA12.16173555

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWE, JOHN, W., MR.,

Mailing Address P.O. BOX 805398

City  
CHICAGOState  
ILZip Code  
60680-4183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173634

Amount of Each Receipt this Period

25000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SABIN, ANDREW, E., MR.,

Mailing Address 300 PANTIGO PL STE 102

City  
EAST HAMPTONState  
NYZip Code  
11937-2630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SABIN METAL CORPORATIONOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173659

Amount of Each Receipt this Period

19600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SARDINA, EDUARDO, M., ,

Mailing Address 4520 SUNSET DR.

City  
CORAL GABLESState  
FLZip Code  
33143-6239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173617

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 713 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAR, DWIGHT, C., MR.,**

Mailing Address 1132 CHAIN BRIDGE RD

City  
MCLEAN

State  
VA

Zip Code  
22101-2213

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 ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173579**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARTZ, ALAN, D., ,**

Mailing Address 330 MADISON AVE, 15TH FLOOR

City  
NEW YORK

State  
NY

Zip Code  
10017-5032

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUGGENHEIM PARTNERS LLC

Occupation (for Individual)  
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173668**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWARTZ, MARY, E., MRS.,**

Mailing Address 2386B E. HERITAGE WAY  
SUITE B

City  
SALT LAKE CITY

State  
UT

Zip Code  
84109-1808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PACHYONYCHIA CONGENITA PROJECT

Occupation (for Individual)  
PACHYONYCHIA CONGENITA PROJE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173691**

Amount of Each Receipt this Period

19700.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, ROBERT, L., ,

Mailing Address 1117 10TH ST NW, APT 1105

City  
WASHINGTONState  
DCZip Code  
20001-6411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VENABLE LLPOccupation (for Individual)  
SENIOR LEGISLATIVE ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173574

Amount of Each Receipt this Period

4600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOBEL, JONATHAN, , ,

Mailing Address 740 PARK AVE

City  
NEW YORKState  
NYZip Code  
10021-4251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOURSQUARE CAPITAL CORPOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173660

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRECHER, JEFFREY, CRAIG, MR.,

Mailing Address 3650 TUXEDO RD NW

City  
ATLANTAState  
GAZip Code  
30305-1068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERCONTINENTAL EXCHANGE, INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173621

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STANARD, JAMES, N., ,**

Mailing Address 570 S SPOONBILL DR.

City  
SARASOTA

State  
FL

Zip Code  
34236-1820

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 ▼

13800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173594**

Amount of Each Receipt this Period

13800.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEERE, WILLIAM, C., ,**

Mailing Address 27471 HARBOR COVE CT

City  
BONITA SPRINGS

State  
FL

Zip Code  
34134-1620

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 ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173592**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEPHENSON, DONNA, Y., MRS.,**

Mailing Address P.O. BOX 43326

City  
ATLANTA

State  
GA

Zip Code  
30336-0326

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173623**

Amount of Each Receipt this Period

30000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENSON, JAMES, E., MR.,

Mailing Address P.O. BOX 43326

City  
ATLANTAState  
GAZip Code  
30336-0326FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YANCEY BROS. COMPANYOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173622

Amount of Each Receipt this Period

30000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOLL, BRUCE, E., MR.,

Mailing Address 754 S COUNTY RD  
HORSHAM PA 19044City  
PALM BEACHState  
FLZip Code  
33480-4826FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOLL BROTHERSOccupation (for Individual)  
VICE CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173583

Amount of Each Receipt this Period

28000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TORREY, MICHAEL, K., MR.,

Mailing Address 1514 NORTH FILLMORE STREET

City  
ARLINGTONState  
VAZip Code  
22201-3910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHAEL TORREY ASSOCIATES, LLCOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173696

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TUFT, THOMAS, E., MR.,**

Mailing Address 101 CENTRAL PARK WEST  
APARTMENT 17B

City  
NEW YORK

State  
NY

Zip Code  
10023-4250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAZARD FRERES & COMPANY LLC

Occupation (for Individual)  
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173661**

Amount of Each Receipt this Period

19600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDERSLOOT, FRANK, L., MR.,**

Mailing Address P.O. BOX 50305

City  
IDAHO FALLS

State  
ID

Zip Code  
83405-0305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MELALEUCA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173630**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VECELLIO, LEO, A., ,**

Mailing Address 120 JUNGLE RD

City  
PALM BEACH

State  
FL

Zip Code  
33480-4810

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VECELLIO GROUP INC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173618**

Amount of Each Receipt this Period

2100.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VLOCK, MICHAEL, K., MR.,**

Mailing Address 984 MAIN STREET

City  
BRANFORDState  
CTZip Code  
06405-3730FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173556

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, THEODORE, C., ,**

Mailing Address 24 ROCKWOOD LANE SPUR

City  
GREENWICHState  
CTZip Code  
06830-3816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PARTNER REINSURANCEOccupation (for Individual)  
REINSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173564

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WANEK, RONALD, , ,**

Mailing Address 1205 SNELL ISLE BOULEVARD NE

City  
SAINT PETERSBURGState  
FLZip Code  
33704-3035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASHLEY FURNITURE INDUST. INCOccupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173604

Amount of Each Receipt this Period

5400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WEBSTER, STEVEN, A., MR.,**

Mailing Address 4033 ELLA LEE LN

City  
HOUSTON

State  
TX

Zip Code  
77027-3910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AVISTA CAPITAL PARTNERS

Occupation (for Individual)  
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173683**

Amount of Each Receipt this Period

33400.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITED, REBECCA, L., ,**

Mailing Address 3650 KLEBBA LANE

City  
MIAMI

State  
FL

Zip Code  
33133-6833

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WINDHAVEN

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173619**

Amount of Each Receipt this Period

2100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILEY, LAWRENCE, A., MR.,**

Mailing Address 108 N. GREEN BAY ROAD

City  
APPLETON

State  
WI

Zip Code  
54911-5625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AKIN GUMP STRAUSS HAUER & FELD LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173699**

Amount of Each Receipt this Period

9100.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, DONALD, R., MR., JR.**

Mailing Address **DRW 540 W. MADISON STREET  
SUITE 2500**

City  
**CHICAGO**

State  
**IL**

Zip Code  
**60661-2591**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DRW HOLDINGS**

Occupation (for Individual)  
**CEO**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**33400.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173633**

Amount of Each Receipt this Period

**33400.00**

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YOUNGKIN, GLENN, A., MR.,**

Mailing Address **9640 GEORGETOWN PIKE**

City  
**GREAT FALLS**

State  
**VA**

Zip Code  
**22066-2638**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**THE CARLYLE GROUP**

Occupation (for Individual)  
**PRIVATE EQUITY MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**19600.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173693**

Amount of Each Receipt this Period

**19600.00**

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZIDE, STEPHEN, M., MR.,**

Mailing Address **35 BINNEY LANE**

City  
**OLD GREENWICH**

State  
**CT**

Zip Code  
**06870-2329**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BAIN CAPITAL, L.L.C.**

Occupation (for Individual)  
**INVESTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**19600.00**

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173558**

Amount of Each Receipt this Period

**19600.00**

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN COLLEGE OF CARDIOLOGY PAC**

Mailing Address 2400 N. STREET, NW

City  
WASHINGTON

State  
DC

Zip Code  
20037-1153

FEC ID number of contributing  
federal political committee.

**C** C00375360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173571**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN HEALTH CARE ASSOCIATION PAC**

Mailing Address 1201 L STREET, NW

City  
WASHINGTON

State  
DC

Zip Code  
20005-4024

FEC ID number of contributing  
federal political committee.

**C** C00006080

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173567**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN STAFFING ASSOCIATION PAC**

Mailing Address 277 SOUTH WASHINGTON STREET  
SUITE 200

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3675

FEC ID number of contributing  
federal political committee.

**C** C00145623

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173695**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AT&T FEDERAL PAC**

Mailing Address 208 S AKARD ST STE 3521

City  
DALLASState  
TXZip Code  
75202-4206FEC ID number of contributing  
federal political committee.

C

C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173684

Amount of Each Receipt this Period

15000.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLAY COOLEY INVESTMENTS**

Mailing Address 1500 I-20 WEST

City  
ARLINGTONState  
TXZip Code  
76017-5838FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173686

Amount of Each Receipt this Period

4600.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FEDEX PAC**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHISState  
TNZip Code  
38120-4117FEC ID number of contributing  
federal political committee.

C

C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173677

Amount of Each Receipt this Period

5000.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. FEDEX PAC**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHIS

State  
TN

Zip Code  
38120-4117

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173678**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. FEDEX PAC**

Mailing Address 942 S SHADY GROVE RD

City  
MEMPHIS

State  
TN

Zip Code  
38120-4117

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173679**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HEALTH CARE SERVICE CORPORATION EMPLOYEES' PAC**

Mailing Address 300 E. RANDOLPH ST.

City  
CHICAGO

State  
IL

Zip Code  
60601-5014

FEC ID number of contributing  
federal political committee.

**C** C00199711

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173638**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. IHEARTMEDIA, INC - CLEAR CHANNEL OUTDOOR PAC**

Mailing Address 701 8TH STREET NW  
SUITE 350

City  
WASHINGTON

State  
DC

Zip Code  
20001-3878

FEC ID number of contributing  
federal political committee.

**C** C00498584

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173568**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. KEYHOLE PARTNERS LLC**

Mailing Address 6044 YEATS MANOR DR.

City  
TAMPA

State  
FL

Zip Code  
33616-1302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31800.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173581**

Amount of Each Receipt this Period

31800.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. KOCH INDUSTRIES INC. PAC**

Mailing Address 600 14TH ST NW STE 800

City  
WASHINGTON

State  
DC

Zip Code  
20005-2099

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173569**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 725 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL SHOOTING SPORTS FOUNDATION, INC.**

Mailing Address 11 MILE HILL RD.

City  
NEWTOWN

State  
CT

Zip Code  
06470-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173562**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PFIZER PAC**

Mailing Address 235 E 42ND ST

City  
NEW YORK

State  
NY

Zip Code  
10017-5703

FEC ID number of contributing  
federal political committee.

C C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173665**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. POWER PAC EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVE. NW  
SUITE 214

City  
WASHINGTON

State  
DC

Zip Code  
20004-2608

FEC ID number of contributing  
federal political committee.

C C00095869

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173570**

Amount of Each Receipt this Period

15000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PRICE WATERHOUSE COOPERS PAC**

Mailing Address 1301 K ST NW  
SUITE 800W

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00107235

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**01** / **29** / **2016**

**Transaction ID : SA12.100002**

Amount of Each Receipt this Period

-3000.00

☒ Memo Item

**CORRECTION OF ALLOCATION OF FUNDS**

**TEAM RYAN - JOINT FUNDRAISING CONTRIBUTION  
- CORRECTION OF ALLOCATION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SILENCER SHOP**

Mailing Address 13729 RESEARCH BLVD STE 630

City

AUSTIN

State

TX

Zip Code

78750-1890

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173690**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

**TRANSFER**

**JFC ATTRIB: TEAM RYAN**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WISCONSIN HOSPITAL ASSN. CONDUIT**

Mailing Address 5510 RESEARCH PARK DR.

City

FITCHBURG

State

WI

Zip Code

53711-5377

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173704**

Amount of Each Receipt this Period

200.00

☒ Memo Item

**TRANSFER**

**JFC ATTRIB: TEAM RYAN**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. THE MCMORRIS RODGERS AMERICAN DREAM PROJECT**

Mailing Address PO BOX 2485

City  
SPRINGFIELD

State  
VA

Zip Code  
22152-0485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23562.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16166468**

Amount of Each Receipt this Period

23562.53

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CARSON, RUSSELL, L., MR.,**

Mailing Address 320 PARK AVENUE  
SUITE 25

City  
NEW YORK

State  
NY

Zip Code  
10022-6833

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WELSH, CARSON, ANDERSON & STOW

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : SA12.16167711**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: THE MCMORRIS RODGERS AMERICAN  
DREAM PROJECT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FISHER, CYNTHIA, A., MS.,**

Mailing Address 186 PARK STREET

City  
NEWTON

State  
MA

Zip Code  
02458-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WATER-REV LLC.

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA12.16167712**

Amount of Each Receipt this Period

33400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: THE MCMORRIS RODGERS AMERICAN  
DREAM PROJECT

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23562.53



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUKRAL, JOHN, , MR.,**

Mailing Address 8 ROCKY POINT ROAD

City

OLD GREENWICH

State

CT

Zip Code

06870-2314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

NORTHWOOD INVESTMENTS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **03** / **2016**

**Transaction ID : SA12.16167710**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: THE MCMORRIS RODGERS AMERICAN DREAM PROJECT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALADAO VICTORY FUND**

Mailing Address 504 VAN NESS AVE

City

FRESNO

State

CA

Zip Code

93721-2924

FEC ID number of contributing  
federal political committee.

**C** C00562975

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

**03** / **17** / **2016**

**Transaction ID : SA12.16149122**

Amount of Each Receipt this Period

30000.00

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HARRIS, JOHN, C., MR.,**

Mailing Address 23300 W. OAKLAND AVE.

City

COALINGA

State

CA

Zip Code

93210-9804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

HARRIS FARMS, INC.

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**02** / **08** / **2016**

**Transaction ID : SA12.16173707**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: VALADAO VICTORY FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 OF 923

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZERINI, WILLIAM, K., MR.,

Mailing Address P.O. BOX 9517

City  
BAKERSFIELDState  
CAZip Code  
93389-9517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCE BEVERAGE CO.Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M	D D	Y Y Y Y
02	08	2016

Transaction ID : SA12.16173709

Amount of Each Receipt this Period

15000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: VALADAO VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STONE, WILLIAM, , MR.,

Mailing Address P.O. BOX 146

City  
STRATFORDState  
CAZip Code  
93266-0146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STONE LAND COMPANYOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M	D D	Y Y Y Y
02	08	2016

Transaction ID : SA12.16173708

Amount of Each Receipt this Period

10000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: VALADAO VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WESTMORELAND VICTORY COMMITTEE

Mailing Address PO BOX 1117

City  
SHARPSBURGState  
GAZip Code  
30277-0963FEC ID number of contributing  
federal political committee.

C C00462457

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
03	29	2016

Transaction ID : SA12.16163282

Amount of Each Receipt this Period

450.00

☐ Memo Item  
TRANSFER
TRANSFER OF JOINT FUNDRAISING PROCEEDS -  
DONORS PREVIOUSLY DISCLOSED

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450.00

2670428.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 730 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MERIDIAN IMAGING SOLUTIONS**

Mailing Address 5775 GENERAL WASHINGTON DR

City  
ALEXANDRIA

State  
VA

Zip Code  
22312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1431.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA15-0.002112

Amount of Each Receipt this Period

1431.17

☐ Memo Item

REFUND - EQUIP LEASE - See 2/29/2016 PAYMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PALM BREEZE CHARTERS**

Mailing Address 107 E. PALMETTO PARK RD.

City  
BOCA RATON

State  
FL

Zip Code  
33432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2176.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : SA15-0.002109

Amount of Each Receipt this Period

2176.06

☐ Memo Item

REFUND - REGISTRATION FEE - See 2/3/2016  
PAYMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3607.23

3607.23

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BOEHNER FOR SPEAKER COMMITTEE**

Mailing Address 320 1ST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1838

FEC ID number of contributing  
federal political committee.

**C** C00478354

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5514.48

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16164548**

Amount of Each Receipt this Period

5514.48

☐ Memo Item

CONTRIBUTION - BUILDING FUND

DONORS PREVIOUSLY DISCLOSED - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENS

State  
GA

Zip Code  
30605-1332

FEC ID number of contributing  
federal political committee.

**C** C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440612.40

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16164552**

Amount of Each Receipt this Period

361982.97

☐ Memo Item

TRANSFER

RE-COUNT TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CHANDI, NACHHATTAR, S., ,**

Mailing Address 42270 SPECTRUM ST

City  
INDIO

State  
CA

Zip Code  
92203-9513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHANDI GROUP

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164564**

Amount of Each Receipt this Period

5200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND - LEGAL PROCEEDING

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

367497.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 732 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JOHN, J.,**

Mailing Address 1 MARITIME PLZ STE 1400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94111-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PISCES INC

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA12.16164569

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROFF, SUSAN, L., MRS.,**

Mailing Address 9832 CALVIN AVENUE

City  
NORTHRIDGE

State  
CA

Zip Code  
91324-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NW EXCAVATING CO. INC.

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2016

Transaction ID : SA12.16164570

Amount of Each Receipt this Period

14300.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OBERNDORF, WILLIAM, E., MR.,**

Mailing Address 615 FRONT ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94111-1913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPO PARTNERS

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA12.16164563

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 733 OF 923

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARKS, JAMES, R., MR.,

Mailing Address 10474 SANTA MONICA BLVD.  
SUITE 200City  
LOS ANGELESState  
CAZip Code  
90025-6930FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CBIZ MHM LLC

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA12.16164568

Amount of Each Receipt this Period

5200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWAB, CHARLES, R., MR.,

Mailing Address PO BOX 192861

City  
SAN FRANCISCOState  
CAZip Code  
94119-2861FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHARLES SCHWAB &amp; COMPANY INC.

Occupation (for Individual)

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA12.16164562

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCRIVNER, DOUGLAS, G., ,

Mailing Address 25461 W FREEMONT RD

City  
LOS ALTOS HILLSState  
CAZip Code  
94022-3538FEC 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 ▼

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA12.16164566

Amount of Each Receipt this Period

5400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIEBEL, THOMAS, M., ,**

Mailing Address 1300 SEAPORT BLVD STE 400

City

REDWOOD CITY

State

CA

Zip Code

94063-5591

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

FIRST VIRTUAL GROUP INC.

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164565**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSEY, DIANE, B., ,**

Mailing Address 2590 JACKSON ST

City

SAN FRANCISCO

State

CA

Zip Code

94115-1121

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

A WILSEY PROPERTIES CO

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164567**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
LEGAL PROCEEDING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City

ATHENS

State

GA

Zip Code

30605-1332

FEC ID number of contributing  
federal political committee.

**C**

C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

415640.78

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16164553**

Amount of Each Receipt this Period

341467.66

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS -  
BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

341467.66

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 735 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, JOHN, J.,**

Mailing Address 1 MARITIME PLZ STE 1400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94111-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PISCES INC

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA12.16164561

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBERNDORF, WILLIAM, E., MR.,**

Mailing Address 615 FRONT ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94111-1913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPO PARTNERS

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA12.16164558

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHWAB, CHARLES, R., MR.,**

Mailing Address PO BOX 192861

City  
SAN FRANCISCO

State  
CA

Zip Code  
94119-2861

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES SCHWAB & COMPANY INC.

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA12.16164557

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 736 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIEBEL, THOMAS, M., ,**

Mailing Address 1300 SEAPORT BLVD STE 400

City  
REDWOOD CITY

State  
CA

Zip Code  
94063-5591

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
FIRST VIRTUAL GROUP INC.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164559**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSEY, DIANE, B., ,**

Mailing Address 2590 JACKSON ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94115-1121

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
A WILSEY PROPERTIES CO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **21** / **2016**

**Transaction ID : SA12.16164560**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: MCCARTHY RYAN VICTORY FUND -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENS

State  
GA

Zip Code  
30605-1332

FEC ID number of contributing  
federal political committee.

**C** C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440612.40

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16164554**

Amount of Each Receipt this Period

78629.43

☐ Memo Item

TRANSFER

RE-COUNT DONORS DISCLOSED ON OTHER  
TRANSFER TRANSFER OF JOINT FUNDRAISING  
PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

78629.43



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 737 OF 923  
(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYAN-MCCARTHY VICTORY**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENSState  
GAZip Code  
30605-1332FEC ID number of contributing  
federal political committee.**C**

C00605717

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415640.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16164556**

Amount of Each Receipt this Period

74173.12

☐ Memo Item  
 TRANSFER
DONORS DISCLOSED ON OTHER TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TEAM RYAN**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENSState  
GAZip Code  
30605-1332FEC ID number of contributing  
federal political committee.**C**

C00545947

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1952636.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16164545**

Amount of Each Receipt this Period

793162.09

☐ Memo Item  
 TRANSFER
TRANSFER OF JOINT FUNDRAISING PROCEEDS -  
BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANSCHUTZ, PHILIP, F., MR.,**Mailing Address 555 17TH STREET  
SUITE 2400City  
DENVERState  
COZip Code  
80202-3941FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE ANSCHUTZ CORPORATIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA12.16173546**

Amount of Each Receipt this Period

6000.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

867335.21

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DRUCKENMILLER, STANLEY, F., MR.,**

Mailing Address 40 WEST 57TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10019-4001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DUQUESNE FAMILY OFFICE LLC

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11400.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173545**

Amount of Each Receipt this Period

11400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISHER, CYNTHIA, A., MS.,**

Mailing Address 186 PARK STREET

City  
NEWTON

State  
MA

Zip Code  
02458-2044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
WATER-REV LLC.

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173544**

Amount of Each Receipt this Period

33600.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUGIN, ROBERT, J., MR.,**

Mailing Address 19 ESSEX ROAD

City  
SUMMIT

State  
NJ

Zip Code  
07901-2801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CELGENE CORPORATION

Occupation (for Individual)  
PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

39400.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173543**

Amount of Each Receipt this Period

39400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 OF 923

(check only one)

<input 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 checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, ANN, L., ,

Mailing Address 703 ISLAND DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173534

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CHARLES, B., ,

Mailing Address 703 ISLAND DRIVE

City  
PALM BEACHState  
FLZip Code  
33480-4742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRANKLIN RESOURCESOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173535

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCINERNEY, THOMAS, E., MR. ,

Mailing Address 274 RIVERSIDE AVE # 2A

City  
WESTPORTState  
CTZip Code  
06880-4823FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUFF POINT ASSOCIATESOccupation (for Individual)  
CO-FOUNDER AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173536

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAIR, JANICE, S., MRS.,**

Mailing Address 1807 RIVER OAKS BLVD.

City  
HOUSTON

State  
TX

Zip Code  
77019-3109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173537**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCNAIR, ROBERT, C., MR., SR.**

Mailing Address TWO RELIANT PARK

City  
HOUSTON

State  
TX

Zip Code  
77054-1573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE HOUSTON TEXANS

Occupation (for Individual)  
CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173538**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REIBEL, JAY, , ,**

Mailing Address 42 DOUBLING ROAD

City  
GREENWICH

State  
CT

Zip Code  
06830-4859

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 ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173539**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAR, DWIGHT, C., MR.,**

Mailing Address 1132 CHAIN BRIDGE RD

City  
MCLEAN

State  
VA

Zip Code  
22101-2213

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 ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173540**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPRECHER, JEFFREY, CRAIG, MR.,**

Mailing Address 3650 TUXEDO RD NW

City  
ATLANTA

State  
GA

Zip Code  
30305-1068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERCONTINENTAL EXCHANGE, INC.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173541**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VLOCK, MICHAEL, K., MR.,**

Mailing Address 984 MAIN STREET

City  
BRANFORD

State  
CT

Zip Code  
06405-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173542**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMGEN INC. PAC**

Mailing Address 601 13TH ST NW FL 12

City  
WASHINGTON

State  
DC

Zip Code  
20005-3819

FEC ID number of contributing  
federal political committee.

**C**

C00251876

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173548**

Amount of Each Receipt this Period

6000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. HONEYWELL INTERNATIONAL PAC**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 500 W

City  
WASHINGTON

State  
DC

Zip Code  
20001-2133

FEC ID number of contributing  
federal political committee.

**C**

C00096156

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173547**

Amount of Each Receipt this Period

45000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. P. G. & E. CORPORATION PAC**

Mailing Address 77 BEALE ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-

FEC ID number of contributing  
federal political committee.

**C**

C00177469

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA12.16173549**

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 743 OF 923

(check only one)

<input 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 checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TEAM RYAN**

Mailing Address 824 S MILLEDGE AVE

City  
ATHENSState  
GAZip Code  
30605-1332FEC ID number of contributing  
federal political committee.

C C00545947

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2599473.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16164546

Amount of Each Receipt this Period

1930055.48

☐ Memo Item

TRANSFER

RE-COUNT TRANSFER OF JOINT FUNDRAISING  
PROCEEDS - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ACHTMEYER, WILLIAM, F., MR.,**Mailing Address 34 1/2 BEACON ST  
APT. 4NCity  
BOSTONState  
MAZip Code  
02108-1423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE PARTHENON GROUPOccupation (for Individual)  
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173520

Amount of Each Receipt this Period

6200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ANSCHUTZ, PHILIP, F., MR.,**Mailing Address 555 17TH STREET  
SUITE 2400City  
DENVERState  
COZip Code  
80202-3941FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE ANSCHUTZ CORPORATIONOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173495

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

SUBTOTAL of Receipts This Page (optional).....▶

1930055.48

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 OF 923

(check only one)

<input 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 checked="" 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BALL, ALLEN, , ,

Mailing Address P.O. BOX 51298

City  
IDAHO FALLSState  
IDZip Code  
83405-1298FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BALL VENTURES LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

78300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173512

Amount of Each Receipt this Period

78300.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARNETT, HOYT, R., ,

Mailing Address 8515 LIVE OAK RD

City  
LAKELANDState  
FLZip Code  
33813-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PUBLIX SUPERMARKETS INC.Occupation (for Individual)  
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173509

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONARD, EDWARD, W., ,

Mailing Address 1324 LEXINGTON AVE, BOX 109

City  
NEW YORKState  
NYZip Code  
10128-1145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

56200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173524

Amount of Each Receipt this Period

56200.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DICKE, JAMES, F., ,**

Mailing Address 422 EASTHAVEN DR.

City  
NEW BREMEN

State  
OH

Zip Code  
45869-1210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CROWN EQUIPMENT

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173528**

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DRUCKENMILLER, STANLEY, F., MR.,**

Mailing Address 40 WEST 57TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10019-4001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DUQUESNE FAMILY OFFICE LLC

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173523**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FAISON, JAY, W., MR.,**

Mailing Address 1355 GREENWOOD CLIFF DR STE 301

City  
CHARLOTTE

State  
NC

Zip Code  
28204-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ZOBO TV

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

56200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173521**

Amount of Each Receipt this Period

56200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, CYNTHIA, A., MS.,**

Mailing Address 186 PARK STREET

City  
NEWTON

State  
MA

Zip Code  
02458-2044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
WATER-REV LLC.

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173517**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOSTER, PAUL, L., MR.,**

Mailing Address 123 W MILLS AVE STE 600  
SUITE 200

City  
EL PASO

State  
TX

Zip Code  
79901-1577

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
WESTERN REFINING COMPANY

Occupation (for Individual)  
CHAIRMAN AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

56200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173531**

Amount of Each Receipt this Period

56200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERRO, DAVID, G., MR.,**

Mailing Address 65 E. GOETHE STREET, APT. 3W

City  
CHICAGO

State  
IL

Zip Code  
60610-7260

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HARRIS ASSOCIATES, LP

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8900.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173515**

Amount of Each Receipt this Period

8900.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUGIN, ROBERT, J., MR.,**

Mailing Address 19 ESSEX ROAD

City  
SUMMIT

State  
NJ

Zip Code  
07901-2801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CELGENE CORPORATION

Occupation (for Individual)  
PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173522**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENKINS, DAVID, , MR.,**

Mailing Address 1801 CENTURY PARK E #1010

City  
LOS ANGELES

State  
CA

Zip Code  
90067-2312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173494**

Amount of Each Receipt this Period

6200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, ANN, L., ,**

Mailing Address 703 ISLAND DRIVE

City  
PALM BEACH

State  
FL

Zip Code  
33480-4742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173501**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, CHARLES, B., ,**

Mailing Address 703 ISLAND DRIVE

City  
PALM BEACH

State  
FL

Zip Code  
33480-4742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
FRANKLIN RESOURCES

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173502**

Amount of Each Receipt this Period

100200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KANEB, JOHN, A., MR.,**

Mailing Address 34 MASCONOMO STREET

City  
MANCHESTER

State  
MA

Zip Code  
01944-1452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE CATAMOUNT COMPANIES

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173518**

Amount of Each Receipt this Period

95000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEISER, MICHAEL, L., MR.,**

Mailing Address 2450 N LAKEVIEW AVE  
SUITE 3920

City  
CHICAGO

State  
IL

Zip Code  
60614-2878

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
R.P.G., INC.

Occupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173516**

Amount of Each Receipt this Period

7200.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 OF 923

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KLARMAN, SETH, A., MR.,

Mailing Address P.O. BOX 171733

City  
BOSTONState  
MAZip Code  
02117-3506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE BAUPOST GROUPOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

92300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173519

Amount of Each Receipt this Period

92300.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANGONE, KEN, G., MR.,

Mailing Address 375 PARK AVENUE

City  
NEW YORKState  
NYZip Code  
10152-0002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INVEMEDOccupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173526

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARCUS, BERNARD, , MR.,

Mailing Address 1266 WEST PACES FERRY ROAD, #615

City  
ATLANTAState  
GAZip Code  
30327-2306FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE MARCUS FOUNDATIONOccupation (for Individual)  
PHILANTHROPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

22200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173511

Amount of Each Receipt this Period

22200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 750 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARCUS, WILMA, , MRS.,**

Mailing Address 7179 AYRSHIRE LN

City  
BOCA RATON

State  
FL

Zip Code  
33496-1419

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 ▼

24900.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173505**

Amount of Each Receipt this Period

24900.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCINERNEY, THOMAS, E., MR. ,**

Mailing Address 274 RIVERSIDE AVE # 2A

City  
WESTPORT

State  
CT

Zip Code  
06880-4823

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BLUFF POINT ASSOCIATES

Occupation (for Individual)  
CO-FOUNDER AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173496**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCNAIR, JANICE, S., MRS.,**

Mailing Address 1807 RIVER OAKS BLVD.

City  
HOUSTON

State  
TX

Zip Code  
77019-3109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03 / 31 / 2016**

**Transaction ID : SA12.16173529**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 751 OF 923

(check only one)

<input 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 checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCNAIR, ROBERT, C., MR., SR.**

Mailing Address TWO RELIANT PARK

City  
HOUSTONState  
TXZip Code  
77054-1573FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE HOUSTON TEXANSOccupation (for Individual)  
CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173530**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
 TRANSFER
JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RANGOS, JOHN, G., MR., SR.**

Mailing Address 701 OSPREY POINT CIRCLE

City  
BOCA RATONState  
FLZip Code  
33431-5245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173508**

Amount of Each Receipt this Period

11202.00

☒ Memo Item  
 TRANSFER
JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. READ, IAN, C., MR.,**

Mailing Address 235 EAST 42ND STREET

City  
NEW YORKState  
NYZip Code  
10017-5703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFIZEROccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA12.16173525**

Amount of Each Receipt this Period

6200.00

☒ Memo Item  
 TRANSFER
JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 752 OF 923

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REIBEL, JAY, , ,

Mailing Address 42 DOUBLING ROAD

 City  
 GREENWICH

 State  
 CT

 Zip Code  
 06830-4859

 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 ▼

100200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173497

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYES, J. CHRISTOPHER, , MR.,

Mailing Address 777 S FLAGLER DR. STE 1500

 City  
 WEST PALM BEACH

 State  
 FL

 Zip Code  
 33401-6157

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 REYES HOLDINGS, LLC

 Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173507

Amount of Each Receipt this Period

20000.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYES, M. JUDE, , MR.,

Mailing Address 777 S FLAGLER DR. STE 1500

 City  
 WEST PALM BEACH

 State  
 FL

 Zip Code  
 33401-6157

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 REYES HOLDINGS, LLC

 Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA12.16173506

Amount of Each Receipt this Period

20000.00

☒ Memo Item  
 TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHAR, DWIGHT, C., MR.,**

Mailing Address 1132 CHAIN BRIDGE RD

City  
MCLEAN

State  
VA

Zip Code  
22101-2213

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 ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173503**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPRECHER, JEFFREY, CRAIG, MR.,**

Mailing Address 3650 TUXEDO RD NW

City  
ATLANTA

State  
GA

Zip Code  
30305-1068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INTERCONTINENTAL EXCHANGE, INC.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173510**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STANARD, JAMES, N., ,**

Mailing Address 570 S SPOONBILL DR.

City  
SARASOTA

State  
FL

Zip Code  
34236-1820

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 ▼

81200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173504**

Amount of Each Receipt this Period

81200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VANDERSLOOT, FRANK, L., MR.,**

Mailing Address P.O. BOX 50305

City  
IDAHO FALLS

State  
ID

Zip Code  
83405-0305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MELALEUCA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

78300.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173513**

Amount of Each Receipt this Period

78300.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VLOCK, MICHAEL, K., MR.,**

Mailing Address 984 MAIN STREET

City  
BRANFORD

State  
CT

Zip Code  
06405-3730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173498**

Amount of Each Receipt this Period

100200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBSTER, STEVEN, A., MR.,**

Mailing Address 4033 ELLA LEE LN

City  
HOUSTON

State  
TX

Zip Code  
77027-3910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
AVISTA CAPITAL PARTNERS

Occupation (for Individual)  
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

56200.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173532**

Amount of Each Receipt this Period

56200.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, DONALD, R., MR., JR.**

Mailing Address DRW 540 W. MADISON STREET  
SUITE 2500

City  
CHICAGO

State  
IL

Zip Code  
60661-2591

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DRW HOLDINGS

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11600.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173514**

Amount of Each Receipt this Period

11600.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AT&T FEDERAL PAC**

Mailing Address 208 S AKARD ST STE 3521

City  
DALLAS

State  
TX

Zip Code  
75202-4206

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173533**

Amount of Each Receipt this Period

45000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOCH INDUSTRIES INC. PAC**

Mailing Address 600 14TH ST NW STE 800

City  
WASHINGTON

State  
DC

Zip Code  
20005-2099

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA12.16173499**

Amount of Each Receipt this Period

45000.00

☒ Memo Item  
TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS  
FUND

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 756 OF 923

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NRCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFIZER PAC**

Mailing Address 235 E 42ND ST

City  
NEW YORKState  
NYZip Code  
10017-5703FEC ID number of contributing  
federal political committee.

C C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173527

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RETAILPAC**Mailing Address 325 7TH STREET NW  
SUITE 1100City  
WASHINGTONState  
DCZip Code  
20004-2825FEC ID number of contributing  
federal political committee.

C C00040329

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16173500

Amount of Each Receipt this Period

7000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: TEAM RYAN - LEGAL PROCEEDINGS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THE MCMORRIS RODGERS AMERICAN DREAM PROJECT**

Mailing Address PO BOX 2485

City  
SPRINGFIELDState  
VAZip Code  
22152-0485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6297.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA12.16166469

Amount of Each Receipt this Period

6297.82

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS - BUILDING FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6297.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FISHER, CYNTHIA, A., MS.,**

Mailing Address 186 PARK STREET

City  
NEWTON

State  
MA

Zip Code  
02458-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WATER-REV LLC.

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA12.16167709

Amount of Each Receipt this Period

11600.00

☒ Memo Item

TRANSFER BUILDING FUND

JFC ATTRIB: THE MCMORRIS RODGERS AMERICAN DREAM PROJECT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHOUEST, GARY, , MR.,**

Mailing Address P.O. BOX 310

City  
GALLIANO

State  
LA

Zip Code  
70354-0310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EDISON CHOUEST OFFSHORE

Occupation (for Individual)  
SHIP OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : SA11.16149098

Amount of Each Receipt this Period

6600.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUMPHREYS, DAVID, C., MR.,**

Mailing Address P.O. BOX 4050

City  
JOPLIN

State  
MO

Zip Code  
64803-4050

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAMKO

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : SA11.16148280

Amount of Each Receipt this Period

33200.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

39800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. THE CHICKASAW NATION**

Mailing Address P.O. BOX 1548

City  
ADA

State  
OK

Zip Code  
74821-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : SA11.16155668**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AMERICAN COLLEGE OF SURGEONS PAC**

Mailing Address 20 F STREET NW  
SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20001-6701

FEC ID number of contributing  
federal political committee.

C C00382424

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11.16169765**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN DENTAL ASSOCIATION PAC**

Mailing Address 1111 14TH STREET, NW  
SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20005-5651

FEC ID number of contributing  
federal political committee.

C C00000729

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11.16155069**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BUILD PAC - NATIONAL ASSOCIATION OF HOME BUILDERS PAC**

Mailing Address 1201 15TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20005-2842

FEC ID number of contributing  
federal political committee.

**C** C00000901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169764**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND**

Mailing Address 8000 W. FLORISSANT AVE

City  
ST. LOUIS

State  
MO

Zip Code  
63136-1414

FEC ID number of contributing  
federal political committee.

**C** C00080515

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **25** / **2016**

**Transaction ID : SA11.16159464**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. GENERAL DYNAMICS CORPORATION PAC**

Mailing Address 3190 FAIRVIEW PARK DRIVE

City  
FALLS CHURCH

State  
VA

Zip Code  
22042-4530

FEC ID number of contributing  
federal political committee.

**C** C00078451

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

**03** / **31** / **2016**

**Transaction ID : SA11.16169762**

Amount of Each Receipt this Period

30000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. HARRIS CORPORATION PAC**

Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850E

City  
WASHINGTON

State  
DC

Zip Code  
20024-2566

FEC ID number of contributing  
federal political committee.

**C** C00100321

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
03 / 31 / 2016

**Transaction ID : SA11.16169763**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. HEALTHCARE FREEDOM FUND**

Mailing Address PO BOX 2485

City  
SPRINGFIELD

State  
VA

Zip Code  
22152-0485

FEC ID number of contributing  
federal political committee.

**C** C00528414

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16600.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
03 / 16 / 2016

**Transaction ID : SA11.16149099**

Amount of Each Receipt this Period

16600.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HUNTINGTON BANCSHARES PAC**

Mailing Address 41 SOUTH HIGH STREET

City  
COLUMBUS

State  
OH

Zip Code  
43215-6101

FEC ID number of contributing  
federal political committee.

**C** C00165589

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
03 / 23 / 2016

**Transaction ID : SA11.16155082**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

34100.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. LONE STAR LEADERSHIP PAC**

Mailing Address 7315 WISCONSIN AVE STE 705

City  
BETHESDA

State  
MD

Zip Code  
20814-3202

FEC ID number of contributing  
federal political committee.

**C** C00415208

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148279**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. LYNN PAC (LEAD YOUR NATION NOW PAC)**

Mailing Address PO BOX 1872

City  
TOPEKA

State  
KS

Zip Code  
66601-1872

FEC ID number of contributing  
federal political committee.

**C** C00491043

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155083**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. LYNN PAC (LEAD YOUR NATION NOW PAC)**

Mailing Address PO BOX 1872

City  
TOPEKA

State  
KS

Zip Code  
66601-1872

FEC ID number of contributing  
federal political committee.

**C** C00491043

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

**03** / **23** / **2016**

**Transaction ID : SA11.16155084**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 762 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL EMERGENCY MEDICINE PAC**

Mailing Address P.O. BOX 619911

City  
DALLAS

State  
TX

Zip Code  
75261-9911

FEC ID number of contributing  
federal political committee.

**C**

C00140061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11.16159708**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NATIONAL MULTIFAMILY HOUSING COUNCIL PAC**

Mailing Address 1850 M STREET NW  
SUITE 540

City  
WASHINGTON

State  
DC

Zip Code  
20036-5816

FEC ID number of contributing  
federal political committee.

**C**

C00130773

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : SA11.16149123**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PEOPLE FOR ENTERPRISE, TRADE AND ECONOMIC GROWTH (PETE PAC)**

Mailing Address 7804 EVENING LANE

City  
ALEXANDRIA

State  
VA

Zip Code  
22306-2754

FEC ID number of contributing  
federal political committee.

**C**

C00363770

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11.16147283**

Amount of Each Receipt this Period

33400.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

63400.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 763 OF 923

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PFIZER PAC**

Mailing Address 235 E 42ND ST

City  
NEW YORK

State  
NY

Zip Code  
10017-5703

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**03** / **29** / **2016**

**Transaction ID : SA11.16160812**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PRICEWATERHOUSECOOPERS PAC**

Mailing Address 1301 K ST NW  
STE 800W

City  
WASHINGTON

State  
DC

Zip Code  
20005-3317

FEC ID number of contributing  
federal political committee.

**C** C00107235

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

**03** / **28** / **2016**

**Transaction ID : SA11.16159709**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION - BUILDING FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC**

Mailing Address 1450 EMPIRE CENTRAL DR.

City  
DALLAS

State  
TX

Zip Code  
75247-4027

FEC ID number of contributing  
federal political committee.

**C** C00360669

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**03** / **15** / **2016**

**Transaction ID : SA11.16148278**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION - RECOUNT FUND

RE-COUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

16000.00

**TOTAL** This Period (last page this line number only)..... ►

3974583.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 764 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ARELLANO, SERGIO, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 894 E SHERIFFS DRAW LANE

City  
SAHUARITAState  
AZZip Code  
85629Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04705**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARIAS, DAMIAN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1259.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARIAS, DAMIAN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1259.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2669.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 765 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BAKER, MARY CAMERON, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

784.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BAKER, MARY CAMERON, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

784.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BARNES, FREDERIC, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1043.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2613.61

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 766 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BARNES, FREDERIC, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

1043.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEHNKE, CREIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04712**

Amount of Each Disbursement this Period

3158.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEHNKE, CREIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

3158.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7361.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 767 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. BELK, STEPHANIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04712**

Amount of Each Disbursement this Period

703.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BELK, STEPHANIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

703.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BENJAMIN, MARK, , ,**

Mailing Address 34800 LYNDON STREET

City  
LIVONIAState  
MIZip Code  
48154Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

150.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1556.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 768 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. BOEDIGHEIMER, ALEXANDER, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04712**

Amount of Each Disbursement this Period

1462.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOEDIGHEIMER, ALEXANDER, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04732**

Amount of Each Disbursement this Period

1462.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOESCH, DOYCE, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2016

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.16152**

Amount of Each Disbursement this Period

150.00

DINNER

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3075.60

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 769 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BROWN, KEVIN, , ,**

Mailing Address 19284 CREEK FIELD CIRCLE

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04705**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROWN, KEVIN, , ,**

Mailing Address 19284 CREEK FIELD CIRCLE

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROWN, KEVIN, , ,**

Mailing Address 19284 CREEK FIELD CIRCLE

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 770 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BROYLES, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04712**

Amount of Each Disbursement this Period

1227.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROYLES, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04732**

Amount of Each Disbursement this Period

1227.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BYERS, PORTER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1437.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3893.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 771 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BYERS, PORTER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1437.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BYRD, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04713**

Amount of Each Disbursement this Period

1148.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BYRD, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1148.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3733.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 772 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CALLAHAN, KENNETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

434.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPPS, TRESSY, , ,**

Mailing Address 5498 WITHERS AVE.

City  
FONTANAState  
CAZip Code  
92336Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAREY, BRITTANY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

595.97

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1330.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 773 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. CAREY, BRITTANY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

595.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHIASSON, DANIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04713**

Amount of Each Disbursement this Period

1671.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHIASSON, DANIEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1671.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3938.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 774 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CHOI, THOMAS, , ,**

Mailing Address 3028 GREENLEAF AVE.

City  
WILMETTEState  
ILZip Code  
60091Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04705**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSTANINI, KATE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04713**

Amount of Each Disbursement this Period

1544.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANINI, KATE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473;**

Amount of Each Disbursement this Period

1544.63

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3239.26

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 775 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. COOMBS, ELIZABETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04713**

Amount of Each Disbursement this Period

1505.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COOMBS, ELIZABETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04742**

Amount of Each Disbursement this Period

1505.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CORLEY, MARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1206.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4218.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 776 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. CORLEY, MARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

1206.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CROXTON, LUCY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04714**

Amount of Each Disbursement this Period

3158.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CROXTON, LUCY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

2775.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7140.93



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 777 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. CUMMINGS, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04714**

Amount of Each Disbursement this Period

3747.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CUMMINGS, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04743**

Amount of Each Disbursement this Period

3747.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DANIEL, TYLER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1099.47

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8595.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 778 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DANIEL, TYLER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04742**

Amount of Each Disbursement this Period

1099.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVIDHIZAR, JAMES, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04714**

Amount of Each Disbursement this Period

1285.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIS, JORDAN, N, ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

4190.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6575.73

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 779 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DAVIS, JORDAN, N, ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04742**

Amount of Each Disbursement this Period

4190.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEVOLL, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

1520.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEVOLL, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

1520.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7231.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 780 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DONOVAN, ALEXI, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

1478.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONOVAN, ALEXI, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04741**

Amount of Each Disbursement this Period

1478.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DRY, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1139.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4096.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 781 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. DRY, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04741**

Amount of Each Disbursement this Period

1139.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DUTRA, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

1325.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUTRA, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

1325.45

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3790.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 782 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. ESCOTO, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

2011.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ESCOTO, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04741**

Amount of Each Disbursement this Period

2011.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FARNASO, KENNETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1568.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5590.48

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 783 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. FARNASO, KENNETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21-0.0474C**

Amount of Each Disbursement this Period

 1568.38☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FIELD, BRETT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21-0.04716**

Amount of Each Disbursement this Period

 1406.19☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIELD, BRETT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21-0.0474I**

Amount of Each Disbursement this Period

 1406.19☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 4380.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 784 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. FOSTER, KIRSTEN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04716**

Amount of Each Disbursement this Period

1260.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FOSTER, KIRSTEN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04740**

Amount of Each Disbursement this Period

1260.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FROMM, ADAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

2355.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4876.59



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 785 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. FROMM, ADAM, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474C**

Amount of Each Disbursement this Period

2355.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GALLO, CAMILLE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04716**

Amount of Each Disbursement this Period

1595.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GALLO, CAMILLE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474I**

Amount of Each Disbursement this Period

1595.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5546.45

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 786 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. GERARD, SARAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04717**

Amount of Each Disbursement this Period

2216.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GERARD, SARAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04740**

Amount of Each Disbursement this Period

2216.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GETTY, KATHERINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1650.69

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6082.99

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 787 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. GETTY, KATHERINE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474C**

Amount of Each Disbursement this Period

1650.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GLEESON, TAYLOR, , ,**

Mailing Address 1090 PAVONE PL

City  
CANASTOTAState  
NYZip Code  
13032Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRIBBIN, BRIDGET, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

732.97

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2583.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 788 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. GRIBBIN, BRIDGET, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474C**

Amount of Each Disbursement this Period

732.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GRIFFIN, GEORGE, G, ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04710**

Amount of Each Disbursement this Period

3497.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRIFFIN, GEORGE, G, ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472!**

Amount of Each Disbursement this Period

3414.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7644.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 789 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. GROSS, JOSIAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0471C**

Amount of Each Disbursement this Period

1592.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GROSS, JOSIAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04730**

Amount of Each Disbursement this Period

1592.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAMEL, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0471'**

Amount of Each Disbursement this Period

1893.97

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5078.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 790 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HAMEL, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1893.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARSHAW, TAYLOR, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04743**

Amount of Each Disbursement this Period

936.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYS, CALEB, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0471**

Amount of Each Disbursement this Period

575.49

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3405.52

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 791 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HAYS, CALEB, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

305.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HORN, JAMES, , ,**

Mailing Address 4948 SHEPHERDSTOWN ROAD

City  
MARTINSBURGState  
WVZip Code  
25404Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04705**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOWARD, LAURA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0471**

Amount of Each Disbursement this Period

1218.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1674.02

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 792 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HOWARD, LAURA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1218.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUBERTY, ZACHARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04717**

Amount of Each Disbursement this Period

2003.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUBERTY, ZACHARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2003.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5226.18



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 793 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HUNTER, ZACHARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

2858.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUNTER, ZACHARY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04733**

Amount of Each Disbursement this Period

2524.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUTCHINSON, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1741.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7124.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 794 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. HUTCHINSON, LAUREN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1741.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JAQUES, CORINNE, , ,**

Mailing Address 2220 GLENKIRK DRIVE

City  
SAN JOSEState  
CAZip Code  
95124Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JENTGENS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1987.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3929.56

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 795 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JENTGENS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1987.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JENTGENS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04730**

Amount of Each Disbursement this Period

1987.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JENTGENS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473:**

Amount of Each Disbursement this Period

1987.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5962.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 796 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JOHNSON, JESSICA, F, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04716**

Amount of Each Disbursement this Period

5207.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHNSON, JESSICA, F, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04740**

Amount of Each Disbursement this Period

5207.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOHNSON, TODD, R, ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

4314.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14729.79

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 797 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JOHNSON, TODD, R, ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473:**

Amount of Each Disbursement this Period

4314.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JONES, MERISSA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04718**

Amount of Each Disbursement this Period

1356.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JONES, MERISSA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473:**

Amount of Each Disbursement this Period

1356.77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7027.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 798 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JOONDEPH, CHRISTOPHER, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1251.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOONDEPH, CHRISTOPHER, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04733**

Amount of Each Disbursement this Period

1251.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KASTAN, JACOB, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

998.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 799 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. KASTAN, JACOB, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	1		2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

998.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KENNEDY, JAMES, , ,**

Mailing Address 28 BEEKMAN STREET

City  
PLATTSBURGHState  
NYZip Code  
12901Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	5		2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KIM, ERIC, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	5		2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1473.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2622.09

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 800 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. KIM, ERIC, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1473.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KITTREDGE, STEPHANIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04718**

Amount of Each Disbursement this Period

2067.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KITTREDGE, STEPHANIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2067.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5607.87



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 801 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. KLEFFNER, LAURA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1786.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KLEFFNER, LAURA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04732**

Amount of Each Disbursement this Period

1786.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KLUTTZ, LAWSON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1129.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4702.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 802 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. KLUTTZ, LAWSON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1129.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KNOPP, JANICE, L, ,**

Mailing Address 236 KENTUCKY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNOPP, JANICE, L, ,**

Mailing Address 236 KENTUCKY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11129.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 803 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. KNOWLES, JOSEPH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

1406.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KNOWLES, JOSEPH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

1406.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KOLEAN, CHARLES, , ,**

Mailing Address 96 BAY CIRCLE DRIVE

City  
HOLLANState  
MIZip Code  
49424Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

175.44

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2987.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 804 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. KONARSKE, DAVID, , ,**

Mailing Address 12111 GRAMLICH ROAD

City  
MAYBEEState  
MIZip Code  
48159Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KROEGER, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04719**

Amount of Each Disbursement this Period

2036.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KROEGER, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2036.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4223.56

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 805 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. LEWIS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

1162.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEWIS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

1162.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MADAIO, KRISTA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

2178.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4503.26

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 806 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MADAIO, KRISTA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

2178.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MADISON, ALEXANDER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04719**

Amount of Each Disbursement this Period

1331.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MADISON, ALEXANDER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1331.32

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4840.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 807 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MALKERSON, COLTON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04715**

Amount of Each Disbursement this Period

748.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MALKERSON, COLTON, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

748.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARROLETTI, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0474:**

Amount of Each Disbursement this Period

370.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1867.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 808 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MARTIN, KATHRYN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

4003.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTIN, KATHRYN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

4003.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATZ, ERIC, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

1525.35

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9532.49



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 809 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MATZ, ERIC, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

1525.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCALLISTER, SEAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04719**

Amount of Each Disbursement this Period

2049.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCALLISTER, SEAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2049.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5624.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 810 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MCDONALD, OLIVIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1082.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCDONALD, OLIVIA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04734**

Amount of Each Disbursement this Period

1082.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCGOWAN, DAVID, , ,**

Mailing Address 374 TIERRA ST

City  
HENDERSONState  
NVZip Code  
89014Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

275.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2439.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 811 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MCGOWAN, JEFFREY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

3090.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCGOWAN, JEFFREY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04735**

Amount of Each Disbursement this Period

3090.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MENDOZA, ABRAHAM, , ,**

Mailing Address 1413 EXPOSITION BLVD., APT 113

City  
SACRAMENTOState  
CAZip Code  
95818Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

150.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6330.12

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 812 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. MERRICK, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

755.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MERRICK, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04735**

Amount of Each Disbursement this Period

755.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIRACLE, ETHAN, , ,**

Mailing Address 420 MURNER ROAD, APT 21

City  
GAYLORDState  
MIZip Code  
49735Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

150.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1660.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 813 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MOULTON, JACK, , ,**

Mailing Address 221 GLEN STREET, APT 211

City  
GLEN FALLSState  
NYZip Code  
12801Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NASSAR, GEORGE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04720**

Amount of Each Disbursement this Period

3137.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NASSAR, GEORGE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

3137.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6424.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 814 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. NEWHOUSE, THOMAS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472c**

Amount of Each Disbursement this Period

4083.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEWHOUSE, THOMAS, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04735**

Amount of Each Disbursement this Period

4083.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NOYES, KYLE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472i**

Amount of Each Disbursement this Period

988.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9155.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 815 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. NOYES, KYLE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

988.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OBERLIES, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04720**

Amount of Each Disbursement this Period

1401.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OBERLIES, MICHAEL, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1401.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3791.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 816 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ODEN, DEREK, , ,**

Mailing Address 3523 N. 150TH AVE.

City  
OMAHAState  
NEZip Code  
68116Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PACK, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04720**

Amount of Each Disbursement this Period

2686.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PACK, CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

2686.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5523.84



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 817 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. PAPA, ALEXANDRA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1972.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAPA, ALEXANDRA, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04736**

Amount of Each Disbursement this Period

1972.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PETERSON, THEODORE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

2387.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6333.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 818 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. PETERSON, THEODORE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473f**

Amount of Each Disbursement this Period

2387.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PILEGGI, JOSEPH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472i**

Amount of Each Disbursement this Period

4069.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PILEGGI, JOSEPH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473i**

Amount of Each Disbursement this Period

4069.85

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10527.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 819 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. POSSEHL, KATIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

1395.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POSSEHL, KATIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04736**

Amount of Each Disbursement this Period

1395.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PRITCHARTT, ELIZABETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1770.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4561.28

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 820 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. PRITCHARTT, ELIZABETH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04737**

Amount of Each Disbursement this Period

1770.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REEDY, JONATHAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

3401.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REEDY, JONATHAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04737**

Amount of Each Disbursement this Period

3401.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8574.38

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 821 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. RODAY, ZACK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

812.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RODAY, ZACK, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04737**

Amount of Each Disbursement this Period

812.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROGERS, JOHN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

5019.32

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6643.62

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 822 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ROGERS, JOHN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04737**

Amount of Each Disbursement this Period

5019.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SALERA, ROBERT, , ,**

Mailing Address 320 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

2088.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SALERA, ROBERT, , ,**

Mailing Address 320 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04737**

Amount of Each Disbursement this Period

2088.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9196.36

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 823 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SCHENEWERK, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0471c**

Amount of Each Disbursement this Period

868.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHENEWERK, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472i**

Amount of Each Disbursement this Period

868.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHENEWERK, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473i**

Amount of Each Disbursement this Period

868.69

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2605.87

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 824 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SCHENEWERK, MEGAN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

868.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHOTT, NATHAN, , ,**

Mailing Address 5620 SOUTH LISBON CT.

City  
CENTENNIALState  
COZip Code  
80015Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SEIFERT, KEVIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1523.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2542.38



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 825 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SEIFERT, KEVIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1523.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SEPLOWE, SCOT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04722**

Amount of Each Disbursement this Period

1998.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SEPLOWE, SCOT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1998.07

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5520.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 826 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SHUSTER, AMY, , ,**

Mailing Address 135 EAST CLEMENT STREET

City  
BALTIMOREState  
MDZip Code  
21230Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SIMMS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				1	5						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04722**

Amount of Each Disbursement this Period

5164.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SIMMS, ROBERT, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				3	1						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

5164.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11328.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 827 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. SOLYOMVANI, NATALIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1961.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOLYOMVANI, NATALIE, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04738**

Amount of Each Disbursement this Period

1961.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TAVAREZ, CONRAD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1068.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4991.95

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 828 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. TAVAREZ, CONRAD, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1068.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TAYLOR, SYDNEY, , ,**

Mailing Address 201 MONTANA CT.

City  
BUNKER HILLState  
WVZip Code  
25413Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04728**

Amount of Each Disbursement this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TENEWITZ, LEIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

1995.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3224.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 829 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. TENEWITZ, LEIGH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1995.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TORANZO, WILLIAM, J, ,**

Mailing Address 32 PARK AVE

City  
SHIRLEYState  
NYZip Code  
11967Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04707**

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UCKELE, COURTNEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

833.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3279.87

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 830 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. UCKELE, COURTNEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

278.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UCKELE, COURTNEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQACCT- PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

834.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UCKELE, COURTNEY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

278.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1390.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 831 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WADE, HAMLIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

2020.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WADE, HAMLIN, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04739**

Amount of Each Disbursement this Period

2020.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WATTS, DAVID, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

3228.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7270.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 832 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WATTS, DAVID, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

3228.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WEBER, JOHN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04722**

Amount of Each Disbursement this Period

2176.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WEBER, JOHN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2176.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7582.20



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 833 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WILL, ANTHONY, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

1739.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINKELMAN, P.CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04722**

Amount of Each Disbursement this Period

3498.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINKELMAN, P.CHRISTOPHER, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

3498.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8735.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 834 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WOLFF, EVAN, , ,**

Mailing Address 157 RIDGE ROAD

City  
SHOKANState  
NYZip Code  
12481Purpose of Disbursement  
RESEARCH MATERIALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04726**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. YOUSEFI, MICAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04723**

Amount of Each Disbursement this Period

2283.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. YOUSEFI, MICAH, , ,**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

2283.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4716.96

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 835 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. 1-800-GOT-JUNK?**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address 6315 SEABROOK RD  
STE 105City  
LANHAMState  
MDZip Code  
20706Purpose of Disbursement  
HQ ACCT - MAINTENANCE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

282.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ABM BUILDING SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address LOCKBOX 1852  
PO BOX 8500City  
PHILADELPHIAState  
PAZip Code  
19178-1852Purpose of Disbursement  
HQ ACCT- EQUIPMENT MAINTENANCE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04728**

Amount of Each Disbursement this Period

3182.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACE BEVERAGE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 3301 NEW MEXICO AVE NW

City  
WASHINGTONState  
DCZip Code  
20016Purpose of Disbursement  
CATERING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

19887.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23351.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 836 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ALLEGIANCE DIRECT**

Mailing Address 15 N. KING ST., SUITE 205

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04702**

Amount of Each Disbursement this Period

4063.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEGIANCE LIST MARKETING**

Mailing Address 15 NORTH KING STREET, SUITE 205

City  
LEESBURGState  
VAZip Code  
20175Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04702**

Amount of Each Disbursement this Period

5545.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMARYLLIS INC**

Mailing Address 3701 WEST ST

City  
LANDOVERState  
MDZip Code  
20785Purpose of Disbursement  
DECORATIONS - FLOWERS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

31750.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

41359.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 837 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address C/O ACCOUNTS RECEIVABLE  
1555 WILSON BLVD., STE 307City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB21-0.04724

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address PO BOX 900

City  
ST. JOSEPHState  
MIZip Code  
49085Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB21-0.04724

Amount of Each Disbursement this Period

690.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NEW YORK PALACE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address 455 MADISON AVE

City  
NEW YORKState  
NYZip Code  
10022Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB21-0.0494

Amount of Each Disbursement this Period

690.85

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5690.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 838 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City  
NEWARKState  
NJZip Code  
07101-1270Purpose of Disbursement  
CREDIT CARD PAYMENT - HQ ACCT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

17611.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AIRNET**Mailing Address 801 BROAD STREET  
SUITE 530City  
CHATTANOOGAState  
TNZip Code  
37402Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04920**

Amount of Each Disbursement this Period

70.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 1200 12TH AVE

City  
SEATTLEState  
WAZip Code  
98144Purpose of Disbursement  
HQ ACCT - OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0492**

Amount of Each Disbursement this Period

2781.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17611.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 839 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AT&T GEORGIA**

Mailing Address PO BOX 105068

City  
ATLANTAState  
GAZip Code  
30348-5068Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04921**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUESNAP**

Mailing Address 800 SOUTH STREET, SUITE 640

City  
WALTHAMState  
MAZip Code  
02453Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04921**

Amount of Each Disbursement this Period

199.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. COMCAST CABLE**

Mailing Address PO BOX 3005

City  
SOUTHEASTERNState  
PAZip Code  
19398-3005Purpose of Disbursement  
HQ ACCT - UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04921**

Amount of Each Disbursement this Period

149.85

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 840 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CONFERENCE AMERICA INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address PO BOX 241188

City  
MONTGOMERYState  
ALZip Code  
36124-1188Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04922**

Amount of Each Disbursement this Period

872.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. EXPERTS EXCHANGE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address PO BOX 1062

City  
SAN LUIS OBISPOState  
CAZip Code  
93406Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04922**

Amount of Each Disbursement this Period

19.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FOXIT SOFTWARE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address 39819 PASEO PADRE PKWY

City  
FREMONTState  
CAZip Code  
94538Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04922**

Amount of Each Disbursement this Period

89.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 841 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. PROVANTAGE LLC**

Mailing Address 7249 WHIPPLE AVE NW

City  
N CANTONState  
OHZip Code  
44720Purpose of Disbursement  
HQ ACCT - EQUIPMENT PURCHASE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04927**

Amount of Each Disbursement this Period

5864.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SECURE BY DESIGN**Mailing Address 548 MARKET ST  
#39134City  
SAN FRANCISCOState  
CAZip Code  
94104Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04927**

Amount of Each Disbursement this Period

600.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. STAPLES CREDIT PLAN**Mailing Address DEPT 11 - 0005396544  
PO BOX 183174City  
COLUMBUSState  
OHZip Code  
43218-3174Purpose of Disbursement  
HQ ACCT - FURNITURE PURCHASE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04927**

Amount of Each Disbursement this Period

724.11

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 842 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address PO BOX 25505

City  
LEHIGH VALLEYState  
PAZip Code  
18002-5505Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04927**

Amount of Each Disbursement this Period

5469.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WORLD MARKET**

Mailing Address 200 4TH ST

City  
OAKLANDState  
CAZip Code  
94607Purpose of Disbursement  
HQ ACCT - FURNITURE PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04928**

Amount of Each Disbursement this Period

744.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City  
NEWARKState  
NJZip Code  
07101-1270Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

218933.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

218933.08

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 843 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. 123RF.COM**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

Mailing Address 2650 FOUNTAIN VIEW DR

City  
HOUSTONState  
TXZip Code  
77057Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04925**

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ADOBE SYSTEMS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

Mailing Address 345 PARK AVE

City  
SAN JOSEState  
CAZip Code  
95110-2704Purpose of Disbursement  
COMPUTER SUPPORT

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04929**

Amount of Each Disbursement this Period

211.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ADOBE SYSTEMS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

Mailing Address 345 PARK AVE

City  
SAN JOSEState  
CAZip Code  
95110-2704Purpose of Disbursement  
COMPUTER SUPPORT

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0494;**

Amount of Each Disbursement this Period

99.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 844 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City  
SEATTLEState  
WAZip Code  
98168Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04925**

Amount of Each Disbursement this Period

136.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALEXANDRIA TAXI**

Mailing Address 85 SOUTH BRAGG STREET

City  
ALEXANDRIAState  
VAZip Code  
22312Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04929**

Amount of Each Disbursement this Period

27.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLIANZ GLOBAL ASSISTANCE**Mailing Address 2805 N PARHAM RD  
STE 100City  
RICHMONDState  
VAZip Code  
23294Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

21.88

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 845 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMAZON WEB SERVICES**

Mailing Address PO BOX 81226

City  
SEATTLEState  
WAZip Code  
98108Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

86.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address PO BOX 620081

City  
DALLASState  
TXZip Code  
75262Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

3849.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City  
NEWARKState  
NJZip Code  
07101-1270Purpose of Disbursement  
TRAVEL FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

99.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 846 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

245.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BASECAMP**Mailing Address 30 N RACINE AVE  
#200City  
CHICAGOState  
ILZip Code  
60607Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEST WESTERN INTERNATIONAL**

Mailing Address 6201 N 24TH PKWY

City  
PHOENIXState  
AZZip Code  
85016Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04930**

Amount of Each Disbursement this Period

101.24

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 847 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. BULLFEATHERS OF CAPITOL HILL**

Mailing Address 410 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

145.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CINERGIX**

Mailing Address 1/28 MENTONE PARADE

City  
MENTONE

State

Zip Code  
VIC 3Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

5.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CISCO SYSTEMS**

Mailing Address 170 WEST TASMAN DRIVE

City  
SAN JOSEState  
CAZip Code  
95134Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494:**

Amount of Each Disbursement this Period

49.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 848 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. COSI**

Mailing Address 1751 LAKE COOK RD

City  
CHICAGOState  
ILZip Code  
60015Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

656.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES INC**

Mailing Address PO BOX 20706

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

78.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIGITAL OCEAN**Mailing Address 101 AVENUE OF THE AMERICAS  
10TH FLOORCity  
NEW YORKState  
NYZip Code  
10013Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

10.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 849 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DROPBOX INC**Mailing Address 760 MARKET ST  
STE 1150City  
SAN FRANCISCOState  
CAZip Code  
94102Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04932**

Amount of Each Disbursement this Period

13.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELEARNEXCEL**

Mailing Address 4514 COLE AVENUE, SUITE 600

City  
DALLASState  
TXZip Code  
75205Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04932**

Amount of Each Disbursement this Period

99.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FACEBOOK**

Mailing Address 1601 S CALIFORNIA AVE

City  
PALO ALTOState  
CAZip Code  
94304Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0594**

Amount of Each Disbursement this Period

2398.77

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 850 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Mailing Address PO BOX 672085

City  
DALLASState  
TXZip Code  
75267-2085Purpose of Disbursement  
DELIVERY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04937**

Amount of Each Disbursement this Period

1007.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. GIANT FOOD**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Mailing Address 8301 PROFESSIONAL PL  
STE 115City  
LANDOVERState  
MDZip Code  
20785Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04940**

Amount of Each Disbursement this Period

207.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GODADDY.COM**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Mailing Address 14455 N HAYDEN RD  
STE 226City  
SCOTTSDALEState  
AZZip Code  
85260Purpose of Disbursement  
WEB SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04931**

Amount of Each Disbursement this Period

103.55

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 851 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. GOOGLE INC**Mailing Address DEPT. 33654  
PO BOX 39000City  
SAN FRANCISCOState  
CAZip Code  
94139Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04938**

Amount of Each Disbursement this Period

450.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Groupon**

Mailing Address 600 W. CHICAGO AVE.

City  
CHICAGOState  
ILZip Code  
60654Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04938**

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAMILTON**

Mailing Address 600 14TH ST., NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494;**

Amount of Each Disbursement this Period

12500.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 852 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HARRY AND DAVID**

Mailing Address 2500 S PACIFIC HWY

City  
MEDFORDState  
ORZip Code  
97501Purpose of Disbursement  
DONOR MEMENTOS - FOOD/BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04938**

Amount of Each Disbursement this Period

816.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HELP SCOUT**

Mailing Address 500 HARRISON AVE., FLOOR 3R

City  
BOSTONState  
MAZip Code  
02118Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04938**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HILTON HOTELS CORP**

Mailing Address 7930 JONES BRANCH DR, STE 1100

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04938**

Amount of Each Disbursement this Period

162.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 853 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS CORP**

Mailing Address 7930 JONES BRANCH DR, STE 1100

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
FACILITY RENTAL/CATERING

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04943**

Amount of Each Disbursement this Period

154103.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTELS.COM**Mailing Address 10440 NORTH CENTRAL EXPRESSWAY  
STE 400City  
DALLASState  
TXZip Code  
75231Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04939**

Amount of Each Disbursement this Period

210.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEXIS-NEXIS**

Mailing Address PO BOX 7247-7090

City  
PHILADELPHIAState  
PAZip Code  
19170-7090Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

18137.19

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MAIL CHIMP**Mailing Address 512 MEANS ST  
STE 404City  
ATLANTAState  
GAZip Code  
30318Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0493**

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MANDARIN ORIENTAL HOTELS**

Mailing Address 1330 MARYLAND AVE SW

City  
WASHINGTONState  
DCZip Code  
20024Purpose of Disbursement  
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0493**

Amount of Each Disbursement this Period

7500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL JOURNAL GROUP INC**

Mailing Address 600 NEW HAMPSHIRE AVE NW

City  
WASHINGTONState  
DCZip Code  
20037Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0493**

Amount of Each Disbursement this Period

3750.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 855 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. PACER**

Mailing Address PO BOX 70951

City  
CHARLOTTEState  
NCZip Code  
28272Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

33.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAYPAL INC**

Mailing Address 2211 N 1ST ST

City  
SAN JOSEState  
CAZip Code  
95131Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

263.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PC NAMETAG**

Mailing Address 124 HORIZON DR

City  
VERONAState  
WIZip Code  
53593Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

266.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 856 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. RACKSPACE MANAGED HOSTING**

Mailing Address PO BOX 730759

City  
DALLASState  
TXZip Code  
75373-0759Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494**

Amount of Each Disbursement this Period

48.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. REVUP SOFTWARE**

Mailing Address 702 MARSHALL ST., SUITE 301

City  
REDWOODState  
CAZip Code  
94063Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494**

Amount of Each Disbursement this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494**

Amount of Each Disbursement this Period

173.48

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 857 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. STAMPS.COM**

Mailing Address 1990 E. GRAND AVE.

City  
EL SEGUNDOState  
CAZip Code  
90245-5013Purpose of Disbursement  
POSTAGE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

15.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STANTON & GREENE**

Mailing Address 319 PENNSYLVANIA AVE., SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

4626.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SURVEYMONKEY**

Mailing Address 101 LYTTON AVE.

City  
PALO ALTOState  
CAZip Code  
94301Purpose of Disbursement  
WEB SERVICE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04941**

Amount of Each Disbursement this Period

26.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 858 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SYLVESTER MANAGEMENT CORP**

Mailing Address PO BOX 986

City  
IRMOState  
SCZip Code  
29063Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04942**

Amount of Each Disbursement this Period

80.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE FLORIDA BAR**

Mailing Address 651 E JEFFERSON ST

City  
TALLAHASSEEState  
FLZip Code  
32399Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04937**

Amount of Each Disbursement this Period

350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 405 HOWARD ST

City  
SAN FRANCISCOState  
CAZip Code  
94105Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04942**

Amount of Each Disbursement this Period

448.27

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 859 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER**

Mailing Address MAIN POST OFFICE

City  
WASHINGTONState  
DCZip Code  
20013Purpose of Disbursement  
DELIVERY

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04943**

Amount of Each Disbursement this Period

5.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALL STREET JOURNAL**

Mailing Address 84 SECOND AVE

City  
CHICOPEEState  
MAZip Code  
01020Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04943**

Amount of Each Disbursement this Period

30.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON METRO AREA TRANSIT AUTHORITY**

Mailing Address 600 5TH ST NW

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04943**

Amount of Each Disbursement this Period

100.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 860 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON METRO AREA TRANSIT AUTHORITY**

Mailing Address 600 5TH ST NW

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

3199.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WP ENGINE**Mailing Address 701 BRAZOS ST  
STE 1602City  
AUSTINState  
TXZip Code  
78701Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

600.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WUFOO INFINITY BOX INC**

Mailing Address 12157 W LINEBAUGH AVE

City  
TAMPAState  
FLZip Code  
33626Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

69.95

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 861 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS MERCHANT ACCOUNT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04743**

Amount of Each Disbursement this Period

655.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS MERCHANT ACCOUNT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2016

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

7.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS MERCHANT ACCOUNT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

228.66

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

892.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 862 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS MERCHANT ACCOUNT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

96.21

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS MERCHANT ACCOUNT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

Mailing Address PO BOX 981532

City  
EL PASOState  
TXZip Code  
79998Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

1608.25

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. ASHLEY EVENTS LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address 952 MCCLEARY STREET

City  
DELRAY BEACHState  
FLZip Code  
33483Purpose of Disbursement  
STAGING/AUDIO/VISUAL/LIGHTING

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

299263.25

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

300967.71
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 863 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. AUDIO VISUAL SYSTEMS**

Mailing Address 1455 PENNSYLVANIA AVE., NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
EQUIPMENT RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

2475.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

55250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
BANK FEE/WEB SVC/LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470:**

Amount of Each Disbursement this Period

339.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

58065.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 864 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

8250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL LISTS**

Mailing Address 1252 RAMBLING RILL CIR

City  
STATHAMState  
GAZip Code  
30666Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04707**

Amount of Each Disbursement this Period

1178.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

19500.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

28928.53



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 865 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CENTURY LINK**

Mailing Address PO BOX 52187

City  
PHOENIXState  
AZZip Code  
85072-2187Purpose of Disbursement  
HQ ACCT - PHONE SVC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

86.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CENTURY LINK**

Mailing Address PO BOX 52187

City  
PHOENIXState  
AZZip Code  
85072-2187Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04708**

Amount of Each Disbursement this Period

31.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CENTURY LINK**

Mailing Address PO BOX 52187

City  
PHOENIXState  
AZZip Code  
85072-2187Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

29.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 866 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

310.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHURCHILL DOWNS**Mailing Address 700 CENTRAL AVE  
ATTN: ACCOUNTING DERBY TICKETSCity  
LOUISVILLEState  
KYZip Code  
40208Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04705**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHURCHILL DOWNS**Mailing Address 700 CENTRAL AVE  
ATTN: ACCOUNTING DERBY TICKETSCity  
LOUISVILLEState  
KYZip Code  
40208Purpose of Disbursement  
FACILITY RENTAL/CATERING/TICKETS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

53145.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54205.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 867 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04702**

Amount of Each Disbursement this Period

11611.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04728**

Amount of Each Disbursement this Period

312.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

1.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11924.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 868 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. COGENT COMMUNICATIONS INC**

Mailing Address PO BOX 791087

City  
**BALTIMORE**State  
**MD**Zip Code  
**21279-1087**Purpose of Disbursement  
**HQ ACCT - WEB SERVICE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

2100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
**BOSTON**State  
**VA**Zip Code  
**22713**Purpose of Disbursement  
**POSTAGE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

61811.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
**BOSTON**State  
**VA**Zip Code  
**22713**Purpose of Disbursement  
**PRINTING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

90197.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

154108.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 869 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
BOSTONState  
VAZip Code  
22713Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

23246.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
BOSTONState  
VAZip Code  
22713Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		18		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04723**

Amount of Each Disbursement this Period

15179.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
BOSTONState  
VAZip Code  
22713Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

34745.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73171.81

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 870 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATION CORP OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City  
BOSTONState  
VAZip Code  
22713Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

27509.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR.

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
TRAVEL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04700**

Amount of Each Disbursement this Period

10398.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494**

Amount of Each Disbursement this Period

189.10

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

37908.12
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 871 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

Mailing Address 60 Massachusetts Ave NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

47.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

Mailing Address 60 Massachusetts Ave NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

245.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Avis**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

248.76

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 872 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Avis**

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

598.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Avis**

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

303.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

15.45

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 873 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

82.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

41.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

17.10

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 874 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

20.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

43.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

38.24

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 875 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

146.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

109.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

21.18

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 876 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

18.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Costco**

Mailing Address 2441 Market St NE

City  
WashingtonState  
DCZip Code  
20018Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

570.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DCA Parking**

Mailing Address 2401 Smith Blvd

City  
ArlingtonState  
VAZip Code  
22202Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

106.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 877 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NRCC

Full Name (Last, First, Middle Initial)

**A. DCA Parking**

Mailing Address 2401 Smith Blvd

City  
ArlingtonState  
VAZip Code  
22202Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

C

Transaction ID : SB21-0.04944

Amount of Each Disbursement this Period

162.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30344Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

C

Transaction ID : SB21-0.04944

Amount of Each Disbursement this Period

787.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AltantaState  
GAZip Code  
30320Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

C

Transaction ID : SB21-0.04944

Amount of Each Disbursement this Period

189.10

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00
------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 878 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Double Tree**

Mailing Address 6800 Fleur Drive

City  
Des MoinesState  
IAZip Code  
50321Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

215.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Double Tree**

Mailing Address 6800 Fleur Drive

City  
Des MoinesState  
IAZip Code  
50321Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

200.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Embassy Suites**

Mailing Address 600 North State St

City  
ChicagoState  
ILZip Code  
60654Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

126.88

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 879 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Embassy Suites**

Mailing Address 600 North State St

City  
ChicagoState  
ILZip Code  
60654Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

126.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Goldener Hirsch**

Mailing Address 7570 Royal Street

City  
Park CityState  
UTZip Code  
84060Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

421.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

28.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 880 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Osteria Morini**

Mailing Address 301 Water Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

1300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Racks Downtown**

Mailing Address 402 Plaza Real Sute A=B

City  
Boca RatonState  
FLZip Code  
33432Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

668.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ritz Carlton DC**

Mailing Address 3100 South Street NW

City  
WashingtonState  
DCZip Code  
20007Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.0494**

Amount of Each Disbursement this Period

251.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0	0	0	0	0	0	0	0	0	0	0	0	0	0



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 881 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Safeway**

Mailing Address 415 14th Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

415.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Safeway**

Mailing Address 415 14th Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

45.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Splash Seafood**

Mailing Address 303 Locust Street

City  
Des MoinesState  
IAZip Code  
50309Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04944**

Amount of Each Disbursement this Period

424.62

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 882 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR.

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
TRAVEL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

736.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALDEN, GREG, , ,**

Mailing Address 320 First St. SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

387.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Double Tree**

Mailing Address 3342 Peachtree Road NE

City  
AtlantaState  
GAZip Code  
30326Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494!**

Amount of Each Disbursement this Period

195.97

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

736.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 883 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR.

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
TRAVEL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

3975.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Airbnb**

Mailing Address 888 Brannan Street

City  
San FranciscoState  
CAZip Code  
94013Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

782.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0494!**

Amount of Each Disbursement this Period

200.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3975.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 884 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

49.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frontier Airlines**

Mailing Address 7001 Tower Rd

City  
DenverState  
COZip Code  
80249Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

161.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 885 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Frontier Airlines**

Mailing Address 7001 Tower Rd

City  
DenverState  
COZip Code  
80249Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

206.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Express**

Mailing Address 2224 Auburn Blvd

City  
SacramentoState  
CAZip Code  
95821Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

134.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Holiday Inn Express**

Mailing Address 27513 Wayne Mills Place

City  
ValenciaState  
CAZip Code  
91355Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

171.37

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 886 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Holsteins**

Mailing Address 3708 S Las Vegas Blvd

City  
Las VegasState  
NVZip Code  
89109Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

211.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11375Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11375Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

20.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 887 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11375Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

258.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

146.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

126.10

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 888 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JetBlue**

Mailing Address 2701 Queens Plaza N

City  
Long Island CityState  
NYZip Code  
11101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paris Las Vegas**

Mailing Address 3655 S Las Vegas Blvd

City  
Las VegasState  
NVZip Code  
89109Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

198.24

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 889 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Paris Las Vegas**

Mailing Address 3655 S Las Vegas Blvd

City  
Las VegasState  
NVZip Code  
89109Purpose of Disbursement  
TRAVEL

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

34.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
TRAVEL SERVICES

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

481.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONCUR TECHNOLOGIES INC**

Mailing Address 62157 COLLECTIONS CENTER DR.

City  
CHICAGOState  
ILZip Code  
60693Purpose of Disbursement  
TRAVEL SERVICES

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

2274.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2756.07

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 890 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

Mailing Address 60 Massachusetts Ave NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

321.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

534.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

534.70

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 891 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. Lucca**

Mailing Address 501 E Camino Real

City  
Boca RatonState  
FLZip Code  
33432Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

284.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paris Las Vegas**

Mailing Address 3655 S Las Vegas Blvd

City  
Las VegasState  
NVZip Code  
89109Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

34.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paris Las Vegas**

Mailing Address 3655 S Las Vegas Blvd

City  
Las VegasState  
NVZip Code  
89109Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04945**

Amount of Each Disbursement this Period

64.96

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 892 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CONSERVATIVE CONNECTOR LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 190 MONROE AVENUE ST NW STE 500

City  
GRAND RAPIDSState  
MIZip Code  
49503Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04726**

Amount of Each Disbursement this Period

72510.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CROSBY OTTENHOFF GROUP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

Mailing Address 611 PENNSYLVANIA AVE., SE #267

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04730**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DC TREASURER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2016

Mailing Address PO BOX 96019

City  
WASHINGTONState  
DCZip Code  
20090-6019Purpose of Disbursement  
TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

80260.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 893 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DE LAGE LANDEN FINANCIAL SERVICES**

Mailing Address PO BOX 41602

City  
PHILADELPHIAState  
PAZip Code  
19101-1602Purpose of Disbursement  
HQ ACCT - EQUIPMENT RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

1512.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DESIGN CUISINE**

Mailing Address 2659 SOUTH SHIRLINGTON RD

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04723**

Amount of Each Disbursement this Period

326162.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIRECT RESPONSE STRATEGIES**Mailing Address 228 S WASHINGTON ST  
STE B30City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470:**

Amount of Each Disbursement this Period

5347.34

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

333021.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 894 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. DRUCKER LAWHON, LLP**

Mailing Address 317 15TH STREET, NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DRUCKER LAWHON, LLP**

Mailing Address 317 15TH STREET, NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

10447.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELAVON**

Mailing Address ONE CONCOURSE PKWY, STE 300

City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474:**

Amount of Each Disbursement this Period

2765.88

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23213.60

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 895 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. FLS CONNECT LLC**Mailing Address 7300 HUDSON BLVD  
STE 270City  
ST PAULState  
MNZip Code  
55128Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	5					2	0	1

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

64154.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FLY ENTERTAINMENT**

Mailing Address 4219 HILLSBORO PIKE, SUITE 234

City  
NASHVILLEState  
TNZip Code  
37215Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				0	9					2	0	1

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRAPHITE CREATIVE**Mailing Address 2715 MOUNT VERNON AVE.  
STE 920City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				0	8					2	0	1

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

950.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7	2	6	0	4	.	1	1
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 896 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. HUCKABY DAVIS LISKER**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

20027.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INFOGROUP**

Mailing Address PO BOX 3243

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04702**

Amount of Each Disbursement this Period

699.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INFOGROUP**

Mailing Address PO BOX 3243

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

1974.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22701.10



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 897 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
PAYROLL SVC/TAXES/INSUR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

428.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
HQACCT- PAYROLL/TAXES/SVC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

8722.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
PAYROLL SVC/TAXES/INSUR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04711**

Amount of Each Disbursement this Period

157453.66

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166604.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 898 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
HQACCT- PAYROLL/TAXES/SVC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473C**

Amount of Each Disbursement this Period

8908.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City  
KINGWOODState  
TXZip Code  
77339Purpose of Disbursement  
PAYROLL SVC/TAXES/INSUR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473C**

Amount of Each Disbursement this Period

159106.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. IQ MEDIA**Mailing Address 1001 EAST HECTOR STREET  
SUITE 401City  
CONSHOHOCKENState  
PAZip Code  
19428Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470C**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

170514.39

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 899 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JANI-KING OF WASHINGTON DC INC.**

Mailing Address PO BOX 741360

City  
ATLANTAState  
GAZip Code  
30384-1360Purpose of Disbursement  
HQ ACCT - PERSONNEL SVC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

3899.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEVEL 3 COMMUNICATIONS LLC**

Mailing Address PO BOX 910182

City  
DENVERState  
COZip Code  
80291-0182Purpose of Disbursement  
HQ ACCT - PHONE SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04709**

Amount of Each Disbursement this Period

1336.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LN CONSULTING**

Mailing Address 121 STATE ST

City  
HARRISBURGState  
PAZip Code  
17101Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10235.89

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 900 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MAIL AMERICA COMMUNICATIONS INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 1174 ELKTON FARM RD

City  
FORESTState  
VAZip Code  
24551Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

10031.31

☐

Memo Item

Full Name (Last, First, Middle Initial)

**B. MDS COMMUNICATIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 545 W JUANITA AVE

City  
MESAState  
AZZip Code  
85210Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.04709**

Amount of Each Disbursement this Period

11333.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

**C. MERIDIAN WORKFLOW NAVIGATION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address 5775 GENERAL WASHINGTON DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22312Purpose of Disbursement  
HQ ACCT - EQUIPMENT RENTAL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

1541.15

☐

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22905.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 901 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MERIDIAN WORKFLOW NAVIGATION**

Mailing Address 5775 GENERAL WASHINGTON DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22312Purpose of Disbursement  
HQ ACCT - EQUIPMENT RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04728**

Amount of Each Disbursement this Period

348.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MERKLE INC**

Mailing Address 100 JAMISON CT

City  
HAGERSTOWNState  
MDZip Code  
21740Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04729**

Amount of Each Disbursement this Period

29996.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MORGAN, MEREDITH & ASSOCIATES**

Mailing Address 22780 INDIAN CREEK DRIVE

City  
DULLESState  
VAZip Code  
20166Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				0	2						2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

35069.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65415.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 902 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. MUSTARD SEED INTERACTIVE**

Mailing Address 435 EAST MAIN STREET, SUITE 250

City  
GREENWOODState  
INZip Code  
46143Purpose of Disbursement  
VOID CHECK - RECUT 3/25/2016

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		22		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04682**

Amount of Each Disbursement this Period

-8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MUSTARD SEED INTERACTIVE**

Mailing Address 435 EAST MAIN STREET, SUITE 250

City  
GREENWOODState  
INZip Code  
46143Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL RESEARCH INC**Mailing Address 146 STATE HIGHWAY 34  
STE 250City  
HOLMDELState  
NJZip Code  
07733Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

18250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18250.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 903 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. OCCASIONS CATERERS**

Mailing Address 655 TAYLOR ST., NE

City  
WASHINGTONState  
DCZip Code  
20017Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	3				2	5					2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

23950.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ORKIN**

Mailing Address 202 PERRY PKWY, SUITE 2

City  
GAITHERSBURGState  
MDZip Code  
20877-2172Purpose of Disbursement  
HQ ACCT - MAINTENANCE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	3				3	1					2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

68.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OWENBARROW, LLC**

Mailing Address PO BOX 163

City  
TRACY'S LANDINGState  
MDZip Code  
20779Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	3				1	5					2	0	1	6

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

7100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31118.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 904 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. OXFORD COMMUNICATIONS LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address 321 SOUTH WASHINGTON STREET  
SUITE 2City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

11488.10

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. OXFORD COMMUNICATIONS LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 321 SOUTH WASHINGTON STREET  
SUITE 2City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04709**

Amount of Each Disbursement this Period

16247.50

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. OXFORD COMMUNICATIONS LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 321 SOUTH WASHINGTON STREET  
SUITE 2City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

5637.25

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

33372.85

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 905 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. OXFORD COMMUNICATIONS LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 321 SOUTH WASHINGTON STREET  
SUITE 2City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

5734.35

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. PINNACLE LIST COMPANY INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

Mailing Address 2800 S SHIRLINGTON RD  
STE 970City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04729**

Amount of Each Disbursement this Period

2186.27

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. POSTUP DIGITAL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 75 REMITTANCE DR., DEPT. 6865

City  
CHICAGOState  
ILZip Code  
60675-6865Purpose of Disbursement  
WEB SERVICE

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

22797.12

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

30717.74

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 906 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. POSTUP DIGITAL LLC**

Mailing Address 75 REMITTANCE DR., DEPT. 6865

City  
CHICAGOState  
ILZip Code  
60675-6865Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

15056.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PREFERRED COMMUNICATIONS**Mailing Address 815 KING ST  
STE 209City  
ALEXANDRIAState  
VAZip Code  
22314-3099Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04706**

Amount of Each Disbursement this Period

6759.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PREFERRED COMMUNICATIONS**Mailing Address 815 KING ST  
STE 209City  
ALEXANDRIAState  
VAZip Code  
22314-3099Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

4264.66

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26081.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 907 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. PROGENT CORPORATION**

Mailing Address PO BOX 254737

City  
SACRAMENTOState  
CAZip Code  
95865-4737Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04731**

Amount of Each Disbursement this Period

300.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PUBLIC OPINION STRATEGIES**

Mailing Address 214 N FAYETTE ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04727**

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RESPONSE AMERICA LLC**

Mailing Address 1252 RAMBLING RILL CIR

City  
STATHAMState  
GAZip Code  
30666Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470:**

Amount of Each Disbursement this Period

9679.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22480.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 908 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. RST MARKETING ASSOCIATES INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address 1272 CORPORATE PARK DRIVE

City  
FORESTState  
VAZip Code  
24551Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.0470f**

Amount of Each Disbursement this Period

10906.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RUSSO MILLER & ASSOCIATES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Mailing Address PO BOX 625

C/O ROSA B. PEREZ

City  
BUDAState  
TXZip Code  
78610Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.0470f**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RUSSO MILLER & ASSOCIATES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

Mailing Address PO BOX 625

C/O ROSA B. PEREZ

City  
BUDAState  
TXZip Code  
78610Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21-0.0470f**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20906.31

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 909 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SINGULARIS GROUP**

Mailing Address PO BOX 9265

City  
SHAWNEE MISSIONState  
KSZip Code  
66201Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470:**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING AND MAILING**

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609-1481Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04699**

Amount of Each Disbursement this Period

15322.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING AND MAILING**

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609-1481Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470:**

Amount of Each Disbursement this Period

10433.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26156.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 910 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND MAILING**

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609-1481Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

7171.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STAPLES CREDIT PLAN**Mailing Address DEPT 11 - 0005396544  
PO BOX 183174City  
COLUMBUSState  
OHZip Code  
43218-3174Purpose of Disbursement  
HQ ACCT - OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

1423.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STAPLES CREDIT PLAN**Mailing Address DEPT 11 - 0005396544  
PO BOX 183174City  
COLUMBUSState  
OHZip Code  
43218-3174Purpose of Disbursement  
HQ ACCT - OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0473**

Amount of Each Disbursement this Period

2584.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11178.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 911 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC ADVANCE SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address 611 PENNSYLVANIA AVE SE  
STE 267City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
TRAVEL RESERVATION/BOOKING SVC

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

13053.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address 3180 18TH ST

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

3816.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address 3180 18TH ST

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04744**

Amount of Each Disbursement this Period

479.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17349.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 912 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. SUMMIT OPEN SYSTEMS LLC**

Mailing Address PO BOX 841

City  
ARNOLDState  
MDZip Code  
21012Purpose of Disbursement  
HQ ACCT - COMPUTER SUPPORT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUSAN LILLY & COMPANY**Mailing Address 1005 CONGRESS AVE  
SUITE 910City  
AUSTINState  
TXZip Code  
78701Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

2570.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
STE 400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472:**

Amount of Each Disbursement this Period

124700.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

127570.36



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 913 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
STE 400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C** **Transaction ID : SB21-0.04745**

Amount of Each Disbursement this Period

 12410.03☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
STE 400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C** **Transaction ID : SB21-0.04745**

Amount of Each Disbursement this Period

 4337.74☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE CATALYST GROUP**Mailing Address 600 PENNSYLVANIA AVE SE  
STE 330City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C** **Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

 3500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 20247.77

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 914 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. THE LUKENS COMPANY**Mailing Address 2800 SHIRLINGTON RD  
9TH FLOORCity  
ARLINGTONState  
VAZip Code  
22206-3613Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

3569.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE LUKENS COMPANY**Mailing Address 2800 SHIRLINGTON RD  
9TH FLOORCity  
ARLINGTONState  
VAZip Code  
22206-3613Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04706**

Amount of Each Disbursement this Period

6810.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE LUKENS COMPANY**Mailing Address 2800 SHIRLINGTON RD  
9TH FLOORCity  
ARLINGTONState  
VAZip Code  
22206-3613Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04707**

Amount of Each Disbursement this Period

7167.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17547.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 915 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. THE MCINTOSH COMPANY**

Mailing Address 5310 HARVEST HILL ROAD, STE 209

City  
DALLASState  
TXZip Code  
75230Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04706**

Amount of Each Disbursement this Period

4840.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE TARRANCE GROUP**Mailing Address 201 N UNION ST  
STE 410City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04707**

Amount of Each Disbursement this Period

158.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE TARRANCE GROUP**Mailing Address 201 N UNION ST  
STE 410City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04721**

Amount of Each Disbursement this Period

14886.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

19884.95

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 916 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. THE TARRANCE GROUP**Mailing Address 201 N UNION ST  
STE 410City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0472**

Amount of Each Disbursement this Period

28199.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UPS STORE**

Mailing Address 611 PENNSYLVANIA AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-4303Purpose of Disbursement  
HQ ACCT - PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

1597.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. US MONITOR SERVICE**

Mailing Address 86 MAPLE AVE

City  
NEW YORKState  
NYZip Code  
10956-5092Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0470**

Amount of Each Disbursement this Period

892.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30688.55
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 917 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER**

Mailing Address MAIN POST OFFICE

City  
WASHINGTONState  
DCZip Code  
20013Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VISUAL IMPACT DESIGN**

Mailing Address 1252 RAMBLING RILL CR

City  
STATHAMState  
GAZip Code  
30666Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04703**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK NA**

Mailing Address 1753 PINNACLE DR

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474**

Amount of Each Disbursement this Period

229.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

40729.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 918 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WESTAR SATELLITE SERVICES**

Mailing Address 221 W 26TH STREET

City  
NEW YORKState  
NYZip Code  
10001Purpose of Disbursement  
SATELLITE TV SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04707**

Amount of Each Disbursement this Period

1623.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WESTAR SATELLITE SERVICES**

Mailing Address 221 W 26TH STREET

City  
NEW YORKState  
NYZip Code  
10001Purpose of Disbursement  
SATELLITE TV SERVICE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04726**

Amount of Each Disbursement this Period

497.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WILAND**

Mailing Address PO BOX 174480

City  
DENVERState  
COZip Code  
80217-4480Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04701**

Amount of Each Disbursement this Period

5866.26

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7987.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 919 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. WILAND**

Mailing Address PO BOX 174480

City  
DENVERState  
COZip Code  
80217-4480Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04724**

Amount of Each Disbursement this Period

3253.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
CONDUIT DISTRIBUTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04704**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
CONDUIT DISTRIBUTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.0474:**

Amount of Each Disbursement this Period

175.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3503.40

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 920 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
CONDUIT DISTRIBUTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04743**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
CONDUIT DISTRIBUTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04754**

Amount of Each Disbursement this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VOTESANE PAC**

Mailing Address PO BOX 2713

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
CONDUIT DISTRIBUTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

FEC Identification Number

**C****Transaction ID : SB21-0.04755**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 921 OF 923

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
HQ ACCT - RENT

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21-0.04725**

Amount of Each Disbursement this Period

114271.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

114271.00

2994371.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 922 OF 923

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. CALIFORNIA REPUBLICAN PARTY**Mailing Address 1215 K ST  
SUITE 1220City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

FEC Identification Number

**C****Transaction ID : SB22-0.0469**

Amount of Each Disbursement this Period

16000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16000.00

16000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 923 OF 923

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NRCC**

Full Name (Last, First, Middle Initial)

**A. JONES DAY**

Mailing Address 51 LOUISIANA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20001-2113Purpose of Disbursement  
RECOUNT - LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

FEC Identification Number

**C****Transaction ID : SB29-0.04725**

Amount of Each Disbursement this Period

6312.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6312.50

6312.50