

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

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

FOR LINE NUMBER: PAGE 1163 OF 5394

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. DODDS, CHRISTOPHER, , MR.,

Mailing Address 630 ROAD 16

City  
ELKHARTState  
KSZip Code  
67950-5037FEC 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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2019

Transaction ID : SA11A.18282736

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

B. DODGE, ROBERT, M., MR.,

Mailing Address 1169 N. ANTILLES CIRCLE

City  
SALT LAKE CITYState  
UTZip Code  
84116-4390FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW YORK LIFEOccupation (for Individual)  
INSURANCE AND SECURITIES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 08 / 2019

Transaction ID : SA11A.18250896

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

C. DODGE, ROBERT, M., MR.,

Mailing Address 1169 N. ANTILLES CIRCLE

City  
SALT LAKE CITYState  
UTZip Code  
84116-4390FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW YORK LIFEOccupation (for Individual)  
INSURANCE AND SECURITIES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

Transaction ID : SA11A.18257312

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

75.00

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