

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 855 / 1190

(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)
NATIONAL REPUBLICAN SENATORIAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES N. SCHORIN

Mailing Address 90 RIVERSIDE DR

City State Zip Code
NEW YORK NY 10024-5322

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

Name of Employer Occupation
ELLIOT ASSOCIATES PORTFOLIO MANAGER

Receipt For: 008*
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
30400.00

Date of Receipt

MM / DD / YYYY
11 / 13 / 2009

Transaction ID: SA11.8562742

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. LOREN C. SCHRENK

Mailing Address 430 HACKMANN LANE

City State Zip Code
SAINT LOUIS MO 63141-6904

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

Name of Employer Occupation
EYE CONSULTANTS OF ST. LOUIS PHYSICIAN

Receipt For: 008*
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1250.00

Date of Receipt

MM / DD / YYYY
11 / 24 / 2009

Transaction ID: SA11.8581042

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. GUENTHER SCHROEDER

Mailing Address 53-18 217TH STREET

City State Zip Code
BAYSIDE NY 11364

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 008*
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt

MM / DD / YYYY
11 / 30 / 2009

Transaction ID: SA11.8593879

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30900.00

TOTAL This Period (last page this line number only)

29020461173