

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

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

FOR LINE NUMBER: PAGE 1701 OF 2813

(check only one)

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

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NAME OF COMMITTEE (In Full)

NRCC

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

A. NICHOLAS, PHYLLIS, W., MS.,

Mailing Address 40 HOWARD ROAD

City
GREENWICH

State
CT

Zip Code
06831-3104

FEC ID number of contributing
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
04 / 16 / 2019

Transaction ID : SA11A.18031308

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. NICHOLSON, ROBERT, JAMES, ,

Mailing Address 1130 DOGWOOD DRIVE

City
MCLEAN

State
VA

Zip Code
22101-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BROWNSTEIN HYATT FARBER SCHREC

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
04 / 08 / 2019

Transaction ID : SA11A.18017809

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. NICHOLS, STEVE, , ,

Mailing Address 1901 TRUXTUN AVE

City
BAKERSFIELD

State
CA

Zip Code
93301-5010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
YOUNG & NICHOLS

Occupation (for Individual)
ATTORNEY-PERSONAL INJURY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2019

Transaction ID : SA11A.18062549

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