

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

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

FOR LINE NUMBER: PAGE 1710 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. NOELL, JOHN, W., , JR.**

Mailing Address 135 E. SEVENTH STREET

City  
HINSDALE

State  
IL

Zip Code  
60521-4651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAYER BROWN LLP

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  
04 / 16 / 2019

**Transaction ID : SA11A.18084361**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**B. 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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 05 / 2019

**Transaction ID : SA11A.18009510**

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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 05 / 2019

**Transaction ID : SA11A.18009563**

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)..... ►

575.00