

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

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

FOR LINE NUMBER: PAGE 2712 OF 4722

(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)  
**NRSC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PALIATKA, EDWARD, , MR.,**

Mailing Address **6402 MANOR DR.**

City **BURR RIDGE** State **IL** Zip Code **60527-5767**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**09 / 30 / 2016**

Transaction ID : **SA11A.12189458**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PALIATKA, EDWARD, , MR.,**

Mailing Address **6402 MANOR DR.**

City **BURR RIDGE** State **IL** Zip Code **60527-5767**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**09 / 30 / 2016**

Transaction ID : **SA11A.12189584**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PALMER, BRETT, T., MR.,**

Mailing Address **6505 TWIN OAK PL**

City **FALLS CHURCH** State **VA** Zip Code **22042-3122**

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

Name of Employer (for Individual) Occupation (for Individual)  
**SMALL BUSINESS INVESTOR ALLIANCE PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 30 / 2016**

Transaction ID : **SA11A.12179307**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1050.00**

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

201610240200563039