

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

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

FOR LINE NUMBER: PAGE 5237 OF 9452

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NRSC**

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

**A. DILLEY, DARLENE, L., ,**

Mailing Address 139 AMMANN RD

City  
BOERNE

State  
TX

Zip Code  
78015-4671

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DILLEY ALLERGY & ASTHMA

Occupation (for Individual)  
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

**11 / 11 / 2019**

**Transaction ID : SA11A.14358399**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1983908.42

Date of Receipt

**11 / 11 / 2019**

**Transaction ID : SA11C.1435647727767**

Amount of Each Receipt this Period

2.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

**C. DILLEY, DARLENE, L., ,**

Mailing Address 139 AMMANN RD

City  
BOERNE

State  
TX

Zip Code  
78015-4671

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DILLEY ALLERGY & ASTHMA

Occupation (for Individual)  
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

**11 / 11 / 2019**

**Transaction ID : SA11A.14358400**

Amount of Each Receipt this Period

2.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

52.00