

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2267 OF 8243

(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)

**NRCC**

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

**A. GARNER, JOHN, , ,**

Mailing Address 1349 SW PARK DR.

City  
PRINEVILLEState  
ORZip Code  
97754-2619FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
QUALITY ONE PAINTINGOccupation (for Individual)  
RESIDENTIAL HOUSE PAINTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 08  | 2019    |

**Transaction ID : SA11A.18327497**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION

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

**B. GARNER, KELLI, , ,**Mailing Address 267 KNOX ST.  
BCity  
COSTA MESAState  
CAZip Code  
92627-3745FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MORRIS-ROBERTS ADVERTISINGOccupation (for Individual)  
SENIOR SALES ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 18  | 2019    |

**Transaction ID : SA11A.18361363**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION

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

**C. GARNER, PATRICIA, , ,**

Mailing Address 4326 S SCATTERFIELD RD #241

City  
ANDERSONState  
INZip Code  
46013-2631FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SELFOccupation (for Individual)  
IT QA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 27  | 2019    |

**Transaction ID : SA11A.18397496**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶

105.00

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