

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

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

FOR LINE NUMBER: PAGE 3098 OF 8243

(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. JACKSON, LYNN, L., ,

Mailing Address 1341 SUNSET RD

City
HOOD RIVER

State
OR

Zip Code
97031-7716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW LOOK NEW FEEL

Occupation (for Individual)
MED. ESTHETICS & PODOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

Transaction ID : SA11A.18385599

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. JACKSON, LYNN, L., ,

Mailing Address 1341 SUNSET RD

City
HOOD RIVER

State
OR

Zip Code
97031-7716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW LOOK NEW FEEL

Occupation (for Individual)
MED. ESTHETICS & PODOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

Transaction ID : SA11A.18385605

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. JACKSON, NICOLA, , ,

Mailing Address 73 EAST ELM ST, APT 12B
12B

City
CHICAGO

State
IL

Zip Code
60611-5241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NJCCH

Occupation (for Individual)
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2019

Transaction ID : SA11A.18331035

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

350.00

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