

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

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

FOR LINE NUMBER: PAGE 3744 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. LEWINGER, NATHAN, , ,

Mailing Address 2600 ISLAND BLVD.,  
APT . 2906

City  
AVENTURA

State  
FL

Zip Code  
33160-5212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : SA11A.18402629

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. LEWIN, READ, , ,

Mailing Address 825 BROWNS LN  
1804

City  
GALLATIN

State  
TN

Zip Code  
37066-7474

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11A.18386100

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

C. LEWIS, BOBBY, , MR.,

Mailing Address 5316 SANTA TERESA DR.

City  
EL PASO

State  
TX

Zip Code  
79932-2538

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US DEPARTMENT OF VETERANS AFFAIRS

Occupation (for Individual)  
SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2019

Transaction ID : SA11A.18311271

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

1050.00

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