

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

FOR LINE NUMBER: PAGE 5430 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. ROBERTS, DOUGLAS, M., ,**

Mailing Address 558 SHADES CREST RD

City  
HOOVERState  
ALZip Code  
35226-1204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
09	17	2019

**Transaction ID : SA11A.18361828**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. ROBERTS, DOUGLAS, M., ,**

Mailing Address 558 SHADES CREST RD

City  
HOOVERState  
ALZip Code  
35226-1204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
09	17	2019

**Transaction ID : SA11A.18361867**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. ROBERTSON, EDWARD, , ,**Mailing Address P.O. BOX 67 8400 4TH ST  
P.O. BOX 67City  
TURNERState  
ORZip Code  
97392-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 ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
09	24	2019

**Transaction ID : SA11A.18378550**

Amount of Each Receipt this Period

25.00

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

225.00

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