

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. VON SEE, SHIRLEY, J., MS.,**

Mailing Address P.O. BOX 5532

City  
SUN CITY CENTER

State  
FL

Zip Code  
33571-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KW REALTY

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

**Transaction ID : SA11A.18331405**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. VON SEE, SHIRLEY, J., MS.,**

Mailing Address P.O. BOX 5532

City  
SUN CITY CENTER

State  
FL

Zip Code  
33571-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KW REALTY

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2019

**Transaction ID : SA11A.18340393**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. VONDERLINDEN, GEORGE, A., MR.,**

Mailing Address 19900 BEACH RD  
APT 604

City  
JUPITER

State  
FL

Zip Code  
33469-2883

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

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 / 26 / 2019

**Transaction ID : SA11A.18394856**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

360.00