

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

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

FOR LINE NUMBER: PAGE 2048 OF 3466

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRSC

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

A. MORTON, YOLANDA, A., MS.,

Mailing Address 16262 PINEVIEW RD

City
CANYON COUNTRY

State
CA

Zip Code
91387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MORTON GRINDING INC

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 24 / 2019

Transaction ID : SA11A.14034827

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. MOSE, CHERYL, , ,

Mailing Address 1510 21ST STREET
1

City
LAKE CHARLES

State
LA

Zip Code
70601-8820

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2019

Transaction ID : SA11A.13989690

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. MOSES, MARGARITA, , MRS.,

Mailing Address 5889 DEER CROSSING LN

City
QUINLAN

State
TX

Zip Code
75474-3641

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTHCARE SERVICES

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

604.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11A.14045782

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

170.00