

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

FOR LINE NUMBER: PAGE 2818 OF 3466

(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)

**NRSC**

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

**A. STRUNCK, LORI, , ,**

Mailing Address 22 ELLEN DRIVE

City  
ROCKAWAYState  
NJZip Code  
07866-1905FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RUTGERS UNIVERSITYOccupation (for Individual)  
DENTAL HYGIENIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	04	2019

**Transaction ID : SA11A.13998746**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION

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

**B. STRUSS, DAWN, , ,**

Mailing Address 318 MAIN STREET STE G

City  
SPRINGState  
TXZip Code  
77373-8595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FEMAOccupation (for Individual)  
PA SI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	D D	Y Y Y Y
06	17	2019

**Transaction ID : SA11A.14015679**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

**C. STRUTZEL, J, C., ,**

Mailing Address 9586 SHAMROCK AVE

City  
FOUNTAIN VALLEYState  
CAZip Code  
92708FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
06	19	2019

**Transaction ID : SA11A.14025144**

Amount of Each Receipt this Period

1000.00

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

1085.00

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