

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Spray, J.L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6011 Chartwell Ln
 City Lincoln State NE Zip Code 68516-5540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mattson Ricketts Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 12 / 07 / 2016
Transaction ID : AA5D0BE4BD81843E7ADE
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Stephens, Phillip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 83083
 City Lincoln State NE Zip Code 68501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bob Stephens & Associates Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 09 / 2016
Transaction ID : A11872CB970E84562A15
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Wendelin, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18706 SW 72nd St
 City Crete State NE Zip Code 68333-2581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&D Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 12 / 09 / 2016
Transaction ID : AC54C9157B66B4DC084E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	