

**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)                                      | PAGE 2042 OF 4766                                           |
|                                                                         | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

|                                                                                                                                 |                                                      |                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MR. SHALLI KUMAR</b>                                                           |                                                      | Date of Receipt<br>MM / DD / YYYY<br>11 / 07 / 2014<br><b>Transaction ID : SA11.15740448</b> |
| Mailing Address 4140 UTICA RIDGE RD<br>P.O. BOX 1327                                                                            |                                                      | Amount of Each Receipt this Period<br>32400.00                                               |
| City<br>BETTENDORF                                                                                                              | State<br>IA                                          | Zip Code<br>52722-1632                                                                       |
| FEC ID number of contributing federal political committee.<br>C                                                                 | CONTRIBUTION                                         |                                                                                              |
| Name of Employer<br>INFORMATION REQUESTED PER BEST EFFORTS                                                                      | Occupation<br>INFORMATION REQUESTED PER BEST EFFORTS | Aggregate Year-to-Date<br>32400.00                                                           |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                      |                                                                                              |

|                                                                                                                                 |                          |                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. MIKE KUMBALEK</b>                                                              |                          | Date of Receipt<br>MM / DD / YYYY<br>10 / 30 / 2014<br><b>Transaction ID : SA11.15731264</b> |
| Mailing Address 910 OAKMONT LOOP                                                                                                |                          | Amount of Each Receipt this Period<br>50.00                                                  |
| City<br>ALBANY                                                                                                                  | State<br>OR              | Zip Code<br>97322-4606                                                                       |
| FEC ID number of contributing federal political committee.<br>C                                                                 | CONTRIBUTION             |                                                                                              |
| Name of Employer<br>VENTURE INVESTMENTS                                                                                         | Occupation<br>PURCHASING | Aggregate Year-to-Date<br>494.00                                                             |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |                                                                                              |

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|---------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. MS. RONDA L. KUNAU</b>                                                         |                       | Date of Receipt<br>MM / DD / YYYY<br>10 / 29 / 2014<br><b>Transaction ID : SA11.15729873</b> |
| Mailing Address 2635 S. LOS ALTOS                                                                                               |                       | Amount of Each Receipt this Period<br>100.00                                                 |
| City<br>MESA                                                                                                                    | State<br>AZ           | Zip Code<br>85202-7319                                                                       |
| FEC ID number of contributing federal political committee.<br>C                                                                 | CONTRIBUTION          |                                                                                              |
| Name of Employer<br>RETIRED                                                                                                     | Occupation<br>RETIRED | Aggregate Year-to-Date<br>250.00                                                             |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                       |                                                                                              |

|                                                                  |          |
|------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 32550.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |