

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

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

FOR LINE NUMBER: PAGE 2132 OF 12066

(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. VALERON FERNANDEZ, VICTORIA, , ,**

Mailing Address 6380 SW 63RD TER

City  
SOUTH MIAMI

State  
FL

Zip Code  
33143-2164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CORAL GABLES SURGERY CENTER

Occupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

**02 / 05 / 2020**

**Transaction ID : SA11A.14765324**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8425781.14

Date of Receipt

**02 / 05 / 2020**

**Transaction ID : SA11C.1476045626837**

Amount of Each Receipt this Period

10.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

**C. ANGELUCCI, LOUIS, A., ,**

Mailing Address P.O. BOX 778

City  
LANGHORNE

State  
PA

Zip Code  
19047-0778

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.00

Date of Receipt

**02 / 05 / 2020**

**Transaction ID : SA11A.14765334**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

35.00