

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

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

FOR LINE NUMBER: PAGE 968 OF 3146

(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. GILES, CARL, , MR.,

Mailing Address 2571 CHAROE ST

City  
LEWIS CENTER

State  
OH

Zip Code  
43035-8984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NETJETS INC

Occupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2019

Transaction ID : SA11A.13985193

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

B. GILES, CLIFFORD, , ,

Mailing Address PSC 47 BOX 641

City  
APO

State  
AE

Zip Code  
09470-0007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AAFES

Occupation (for Individual)  
RETAIL CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2019

Transaction ID : SA11A.13938128

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

C. GILES, CLIFFORD, , ,

Mailing Address PSC 47 BOX 641

City  
APO

State  
AE

Zip Code  
09470-0007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AAFES

Occupation (for Individual)  
RETAIL CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2019

Transaction ID : SA11A.13973170

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

110.00

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