

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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. HUGHES, LES, , ,

Mailing Address 590 S RENN

City
FRESNOState
CAZip Code
93727-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

COMMUNITY HOSPITALS OF CENTRAL CALIFOR

Occupation (for Individual)

RESPIRATORY THERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
05	30	2019

Transaction ID : SA11A.13984414

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. HUGHES, ROBERT, , MR.,

Mailing Address 7733 BRIARIDGE ROAD

City
DALLASState
TXZip Code
75248-5311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ROBERT HUGHES ASSOCIATES INC

Occupation (for Individual)

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	D D	Y Y Y Y
05	03	2019

Transaction ID : SA11A.13925675

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. HUGHES, SUZANNE, , MS.,Mailing Address 4949 GENESTA AVE
406City
ENCINOState
CAZip Code
91316-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M	D D	Y Y Y Y
05	22	2019

Transaction ID : SA11A.13962962

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

125.00

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