

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

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

FOR LINE NUMBER: PAGE 3128 OF 13346

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NRCC

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

A. MOLONY, DAVID, , MR.,

Mailing Address 101 BRIDGE ST

City
CATASAUQUAState
PAZip Code
18032-2506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LEHIGH VALLY ORIENTAL MEDICINE CENTRE

Occupation (for Individual)

ACUPUNCTURE AND ORIENTAL ME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2019

Transaction ID : SA11A.18648842

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MOLOSKI, RAMONA, R., MS.,

Mailing Address 16100 CURTIS TRAIL

City
FRAZIER PARKState
CAZip Code
93225-9339FEC 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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 29 / 2019

Transaction ID : SA11A.18650971

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. MONACO, JOHN, , ,

Mailing Address 214 BEACH 148TH STREET
1City
ROCKAWAY PARKState
NYZip Code
11694-1019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

MUSIC COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2019

Transaction ID : SA11A.18537413

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

120.00

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