

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

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

FOR LINE NUMBER: PAGE 1032 OF 4570

(check only one)

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

NRSC

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

A. MALLON, MARC, , MR.,

Mailing Address 970 SIDNEY MARCUS BLVD NE  
 UNIT 1117

City  
 ATLANTA

State  
 GA

Zip Code  
 30324-3157

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

FULTON COUNTY DISTRICT ATTORNEY

Occupation (for Individual)

SR. ADA FOR APPEALS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 13 / 2018

Transaction ID : SA11A.13131853

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

B. MARTIN, EDWARD, , ,

Mailing Address 2328 COLISEUM STREET

City

NEW ORLEANS

State

LA

Zip Code

70130-5767

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 13 / 2018

Transaction ID : SA11A.13132271

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

C. MARTIN, KENNETH, , ,

Mailing Address 5874 COVE DRIVE  
 SUITE 1220

City

ORLANDO

State

FL

Zip Code

32812-2819

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

AQUATIC DESIGN &amp; ENGINEERING, INC.

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 13 / 2018

Transaction ID : SA11A.13132437

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

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

175.00

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