

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

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

FOR LINE NUMBER: PAGE 420 OF 2263

(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. DODGE, ROBERT, , MR.,

Mailing Address 1169 ANTILLES CIRCLE

City
SALT LAKE CITY

State
UT

Zip Code
84116-4390

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW YORK LIFE

Occupation (for Individual)
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11A.13810860

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. DODGE, ROBERT, , MR.,

Mailing Address 1169 ANTILLES CIRCLE

City
SALT LAKE CITY

State
UT

Zip Code
84116-4390

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW YORK LIFE

Occupation (for Individual)
INSURANCE AND SECURITIES SALE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11A.13810868

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. DOFFLEMEYER, DIANE, , ,

Mailing Address 136 JORDANS JOURNEY

City
WILLIAMSBURG

State
VA

Zip Code
23185-1431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTARA

Occupation (for Individual)
NURSE

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
03 / 28 / 2019

Transaction ID : SA11A.13839562

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

155.00

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