

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

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

FOR LINE NUMBER: PAGE 584 OF 2263

(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. GILL, HENRY, , ,**

Mailing Address 3706 PALMA CEIA COURT

City  
TAMPA

State  
FL

Zip Code  
33629-5123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CACI

Occupation (for Individual)

ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11A.13811365

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. GILLESPIE, CLARE, , MS.,**

Mailing Address 4417 OLD SEWARD HWY

City

ANCHORAGE

State

AK

Zip Code

99503-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GILLESPIE AND SONS, INC

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2019

Transaction ID : SA11A.13819527

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. GILLOGLY, BRONSON, R., MR.,**

Mailing Address 1258 GREENWOOD AVE  
APT 16

City

ZANESVILLE

State

OH

Zip Code

43701-4054

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 ▼

668.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 12 / 2019

Transaction ID : SA11A.13807980

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

500.00