

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

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

FOR LINE NUMBER: PAGE 1116 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. MOLOSKU, RAMONA, , MS.,**

Mailing Address 16100 CURTIS TRAIL  
UNIT 4

City  
FRAZIER PARK

State  
CA

Zip Code  
93225-9339

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 ▼

598.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2019

Transaction ID : SA11A.13817195

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

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

**B. MOLOSKU, RAMONA, , MS.,**

Mailing Address 16100 CURTIS TRAIL  
UNIT 4

City  
FRAZIER PARK

State  
CA

Zip Code  
93225-9339

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 ▼

598.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2019

Transaction ID : SA11A.13843147

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. MONACO, JOHN, , MR.,**

Mailing Address 214 BEACH 148TH STREET  
1

City  
ROCKAWAY PARK

State  
NY

Zip Code  
11694-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
MUSIC COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 02 / 2019

Transaction ID : SA11A.13793098

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

186.00

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