

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

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

FOR LINE NUMBER: PAGE 1684 OF 3512

(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. LIDDELL, ROBERT, L., MR., JR.**

Mailing Address 3402 KARLEIGH WAY

City  
RICHMOND

State  
TX

Zip Code  
77406-2560

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSULTANT

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  
06 / 01 / 2019

**Transaction ID : SA11A.18121024**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. LIECHTY, PAUL, E., DR.,**

Mailing Address 7 MEADOWLAKE DR.

City  
HEATH

State  
TX

Zip Code  
75032-8928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KING PAUL OF GENOVIA

Occupation (for Individual)  
CHIROPRACTIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 09 / 2019

**Transaction ID : SA11A.18134469**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. LIECHTY, PAUL, E., DR.,**

Mailing Address 7 MEADOWLAKE DR.

City  
HEATH

State  
TX

Zip Code  
75032-8928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KING PAUL OF GENOVIA

Occupation (for Individual)  
CHIROPRACTIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2019

**Transaction ID : SA11A.18157727**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

110.00