

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

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

FOR LINE NUMBER: PAGE 2099 OF 3512

(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)

NRCC

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

A. NORCROSS, STEPHEN, G., MR.,

Mailing Address 2531 E EDGAR

City
FRESNO

State
CA

Zip Code
93706-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRUIT FILLINGS INC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2019

Transaction ID : SA11A.18128991

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. NORCROSS, STEPHEN, G., MR.,

Mailing Address 2531 E EDGAR

City
FRESNO

State
CA

Zip Code
93706-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRUIT FILLINGS INC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2019

Transaction ID : SA11A.18129336

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. NORFOLK, CHRISTOPHER, L., M SGT,

Mailing Address P.O. BOX 5298

City
ALBUQUERQUE

State
NM

Zip Code
87185-5298

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPARTMENT OF ENGERY

Occupation (for Individual)
TRAINING MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2019

Transaction ID : SA11A.18145350

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)..... ►

310.00