

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

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

FOR LINE NUMBER: PAGE 380 OF 10882

(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. BECK, ROBERT, N., MR.,

Mailing Address P.O. BOX 467

City  
THOMPSONS STATION

State  
TN

Zip Code  
37179-0467

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PREMIERE PROPERTIES GROUP

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2019

Transaction ID : SA11A.18503405

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

B. BECK, RONALD, , MR.,

Mailing Address 136 PLEASANT RIDGE DR.  
#8

City  
EDWARDSVILLE

State  
IL

Zip Code  
62025-3315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BECK AND COMPANY

Occupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

Transaction ID : SA11A.18419573

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

C. BECK, RONALD, , MR.,

Mailing Address 136 PLEASANT RIDGE DR.  
#8

City  
EDWARDSVILLE

State  
IL

Zip Code  
62025-3315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BECK AND COMPANY

Occupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2019

Transaction ID : SA11A.18442451

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

80.00

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