

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. KAN, SOPHIE, , ,**

Mailing Address 208 CLARKEN DR.,

City  
WEST ORANGE

State  
NJ

Zip Code  
07052-3456

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

**Transaction ID : SA11A.18475744**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. KANE, EDWARD, , ,**

Mailing Address 45 REESE RD

City  
MILLVILLE

State  
NJ

Zip Code  
08332-6227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BODYBIO

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2019

**Transaction ID : SA11A.18432940**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. KANE, MIKE, , ,**

Mailing Address 2300 LAKEVIEW PARKWAY  
SUITE 700

City  
ALPHARETTA

State  
GA

Zip Code  
30009-9066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
RETIREMENT PLAN CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1410.00

Date of Receipt

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

**Transaction ID : SA11A.18419429**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

150.00

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