

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

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

FOR LINE NUMBER: PAGE 4126 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. MOLONY, DAVID, , MR.,

Mailing Address 101 BRIDGE ST

City
CATASAUQUA

State
PA

Zip Code
18032-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LEHIGH VALLY ORIENTAL MEDICINE CENTRE

Occupation (for Individual)

ACUPUNCTURE AND ORIENTAL MEI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.18504141

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MOLOSKI, RAMONA, R., MS.,

Mailing Address 16100 CURTIS TRAIL

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2019

Transaction ID : SA11A.18507197

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. MONACO, JOHN, , ,

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

Occupation (for Individual)

MUSIC COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2019

Transaction ID : SA11A.18484267

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)..... ►

120.00