

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. BOGGS, PETER, , ,

Mailing Address 4817 GILBER DRIVE

City
SHREVEPORT

State
LA

Zip Code
71106-1819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WILLIS KNIGHTON HEALTH SYSTEM

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 05 / 2019

Transaction ID : SA11A.18681927

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5443536.91

Date of Receipt

12 / 05 / 2019

Transaction ID : SA11C.1868002012284

Amount of Each Receipt this Period

5.00

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

C. TROUP, TERRY, , ,

Mailing Address 3756 OLD STAGE RD

City
SPRING VALLEY

State
OH

Zip Code
45370-7730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TERRY TROUP

Occupation (for Individual)
PET BOUTIQUE / OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

12 / 05 / 2019

Transaction ID : SA11A.18681930

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

1005.00