

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

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

FOR LINE NUMBER: PAGE 6514 OF 18201

(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. NAUTA, HARING, J., DR., M.D.

Mailing Address 7936 213TH ST E

City
BRADENTON

State
FL

Zip Code
34202-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF LOUISVILLE

Occupation (for Individual)
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1502.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2019

Transaction ID : SA11A.18706624

Amount of Each Receipt this Period

5.00

☐ 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

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2019

Transaction ID : SA11C.1870639636341

Amount of Each Receipt this Period

100.00

☒ 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. NAUTA, HARING, J., DR., M.D.

Mailing Address 7936 213TH ST E

City
BRADENTON

State
FL

Zip Code
34202-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF LOUISVILLE

Occupation (for Individual)
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1502.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2019

Transaction ID : SA11A.18706625

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

105.00