

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9969 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. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC 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 / D D / Y Y Y Y Y Y  
12 / 18 / 2019
**Transaction ID : SA11C.1873032866290**

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

**B. NAUTA, HARING, J., DR., M.D.**

Mailing Address 7936 213TH ST E

City  
BRADENTONState  
FLZip Code  
34202-6300FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UNIVERSITY OF LOUISVILLEOccupation (for Individual)  
NEUROSURGEON

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1502.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 18 / 2019
**Transaction ID : SA11A.18736932**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC 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 / D D / Y Y Y Y Y Y  
12 / 18 / 2019
**Transaction ID : SA11C.1873032866292**

Amount of Each Receipt this Period

50.00

☒ Memo Item  
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►

100.00

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