

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

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

FOR LINE NUMBER: PAGE 5383 OF 14354

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NRSC

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

A. MCKAY, SHELLEY, J., ,

Mailing Address 819 THAYER AVE

City
ASHTABULAState
OHZip Code
44004-2671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAKE HEALTH HOME CARE RET.Occupation (for Individual)
REGISTERED NURSE BSN CRRN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2019

Transaction ID : SA11A.14481780

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

B. WINRED

Mailing Address P.O. 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 ▼

4375729.44

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2019

Transaction ID : SA11C.1447943040614

Amount of Each Receipt this Period

10.00

☒ 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. SIMPSON, TERRENCE, , ,

Mailing Address 5 DEER MEADOW PL

City
CARMEL VALLEYState
CAZip Code
93924-9526FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2019

Transaction ID : SA11A.14481785

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

30.00