

# **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)

**NRSC**

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

**A. AYALA PARSI, HERNAN, F., ,**

Mailing Address 1231 CALLE DON QUIJOTE  
 URB COSTA CARIBE

City  
 PONCE

State  
 PR

Zip Code  
 00716-2020

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 LUIS A AYALA COLON SUCRS INC

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2019

**Transaction ID : SA11A.14148976**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

**B. AYBAR, HECTOR, , ,**

Mailing Address 101 MEADOW LN

City  
 CANBY

State  
 MN

Zip Code  
 56220-3308

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SANFORD HEALTH CANBY

Occupation (for Individual)  
 PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2019

**Transaction ID : SA11A.14149478**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
 CONTRIBUTION

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

**C. AYERS, STEVE, , ,**

Mailing Address 1580 PARK TRAIL DRIVE

City  
 WESTERVILLE

State  
 OH

Zip Code  
 43081-4629

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 LASTING LEGACY FINANCIAL INC

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2019

**Transaction ID : SA11A.14166298**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

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

220.00