

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

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

FOR LINE NUMBER: PAGE 268 OF 4313

(check only one)

☒ 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. BENITES, JOEL, , ,

Mailing Address 2217 LAKE LINE DR.

City

NEW BRAUNFELS

State

TX

Zip Code

78130-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SERVICEKINGS COLLISION REPAIR CENTERS

Occupation (for Individual)

COLLISION REPAIR TECH

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2019

Transaction ID : SA11A.14151387

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. BENNETT, BRUCE, , ,

Mailing Address 135 RIVER RD

City

GETTYSBURG

State

PA

Zip Code

17325-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2019

Transaction ID : SA11A.14162922

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. BENNETT, DALE, C., MR.,

Mailing Address 261 MINORCA BEACH WAY
502

City

NEW SMYRNA BEACH

State

FL

Zip Code

32169-6059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

613.00

Date of Receipt

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

Transaction ID : SA11A.14150382

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

160.00

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