

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 2299 OF 4313

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. MCFARLAND, ANNIE, , ,**

Mailing Address 5617 GREEN APPLE LANE

City  
BRENTWOODState  
TNZip Code  
37027-4732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAR-B-CUTIE DRIVE INNOccupation (for Individual)  
OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M	D D	Y Y Y Y
08	27	2019

**Transaction ID : SA11A.14166843**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. MCFARLANE, MICHAEL, , ,**

Mailing Address 6271 RIVER RIDGE

City  
AUBREYState  
TXZip Code  
76227-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIRLINESOccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M	D D	Y Y Y Y
08	13	2019

**Transaction ID : SA11A.14143782**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

**C. MCFARLANE, MICHAEL, , ,**

Mailing Address 6271 RIVER RIDGE

City  
AUBREYState  
TXZip Code  
76227-4218FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIRLINESOccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M	D D	Y Y Y Y
08	13	2019

**Transaction ID : SA11A.14143788**

Amount of Each Receipt this Period

3.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

108.00

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