

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, THOMAS, W., MR.,

Mailing Address **1514 CARRIAGE HILL DR.**

City **HUDSON** State **OH** Zip Code **44236-4046**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MXR SOURCEONE HEALTHCARE TECHNOLOGIES** Occupation (for Individual) **IT MANAGER**

Receipt For: ☐ Primary ☐ General ☐ Other (specify) **▼** Aggregate Year-to-Date **225.00**

Date of Receipt

09 / 30 / 2017

Transaction ID : **SA11A.12644842**

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMYTHE, MARILYN, B., MRS.,

Mailing Address **75562 PAINTED DESERT DR.**

City **INDIAN WELLS** State **CA** Zip Code **92210-8447**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For: ☐ Primary ☐ General ☐ Other (specify) **▼** Aggregate Year-to-Date **700.00**

Date of Receipt

09 / 03 / 2017

Transaction ID : **SA11A.12625926**

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SNEAD, CHARLOTTE, , MS.,

Mailing Address **608 BATTON HOLLOW RD**

City **MOUNT CLARE** State **WV** Zip Code **26408-7016**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For: ☐ Primary ☐ General ☐ Other (specify) **▼** Aggregate Year-to-Date **950.00**

Date of Receipt

09 / 07 / 2017

Transaction ID : **SA11A.12630454**

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).....▶

225.00

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