

**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)       | PAGE 340 OF 4710             |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROL F. WOROBIJ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 606 RED CREST LANE  
 City BRANCHBURG State NJ Zip Code 08876-3683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOMERSET CO BOARD OF SOCIAL SERVICE Occupation CLERICAL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2015  
**Transaction ID : 2015M09L11AI00657**  
 Amount of Each Receipt this Period  
**100.00**

**B. MR. TODD BITTING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3265  
 City HARRISBURG State PA Zip Code 17105-3265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PUBLIC UTILITY COMMISSION Occupation CLERK  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **12680.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2015  
**Transaction ID : 2015M09L11AI00658**  
 Amount of Each Receipt this Period  
**900.00**

**C. MR. TODD BITTING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3265  
 City HARRISBURG State PA Zip Code 17105-3265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PUBLIC UTILITY COMMISSION Occupation CLERK  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **12680.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2015  
**Transaction ID : 2015M09L11AI00659**  
 Amount of Each Receipt this Period  
**900.00**

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>1900.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |