

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

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

FOR LINE NUMBER: PAGE 1430 OF 2021  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RICK L. NOWAK**

Mailing Address 1325 MCMAHON ROAD

City State Zip Code  
NEENAH WI 54956-6385

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

Name of Employer Occupation  
KURZ INDUSTRIAL SOLUTIONS REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt  
03 / 30 / 2015  
**Transaction ID : 2015M04L11AI04261**

Amount of Each Receipt this Period  
**305.00**

Full Name (Last, First, Middle Initial)  
**B. ABE LAMPART**

Mailing Address 292 MORNING SUN AVENUE

City State Zip Code  
MILL VALLEY CA 94941-3524

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

Name of Employer Occupation  
LAW OFFICES OF ABE LAMPART ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
03 / 30 / 2015  
**Transaction ID : 2015M04L11AI04262**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. DR. MARIETTA SUNGA SUNGA GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City State Zip Code  
BIRMINGHAM AL 35242-2481

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

Name of Employer Occupation  
LIFE SAVVY..WEIGHT LOSS CLINIC PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **217.00**

Date of Receipt  
03 / 30 / 2015  
**Transaction ID : 2015M04L11AI04263**

Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **585.00**

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