

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 124  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Washington State Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Young</p> <p>Mailing Address 9021 W Sagemoor Rd</p> <p>City State Zip Code Pasco WA 99301-8741</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Retired</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">325.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 1 6 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 01019.C626914</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">200.00</span></p> <p>Receipt</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Duane Yount</p> <p>Mailing Address 5717 S 322nd PI</p> <p>City State Zip Code Auburn WA 98001-3870</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Rebar International      Occupation Manager</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">200.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 2 1 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 01019.C627120</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert Zellner</p> <p>Mailing Address 1627 E Bay Dr NE</p> <p>City State Zip Code Olympia WA 98506-3214</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Retired</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 2 7 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 01019.C627859</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p> <p>Receipt</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">350.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>