

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

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

FOR LINE NUMBER: PAGE 1308 / 2513  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael S. Scharf

Mailing Address 6636 Epping Forest Way N.

City State Zip Code  
Jacksonville FL 32217-2666

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

Name of Employer Jacksonville Orthopedic Institute  
Occupation MD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
MM / DD / YYYY  
02 / 12 / 2010

**Transaction ID:** 2010M03L11A103059

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Clarence W. Schawk

Mailing Address 1021 Peterson Avenue  
Apartment 301

City State Zip Code  
Park Ridge IL 60068-5158

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

Name of Employer Schawk, Inc.  
Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID:** 2010M03L11A103060

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Carolyn Scheck

Mailing Address 26W049 Marion Avenue

City State Zip Code  
Wheaton IL 60187-1319

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

Name of Employer Requested  
Occupation Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID:** 2010M03L11A103061

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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