

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 520 / 1253
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. David H. Moore

Mailing Address 12505 Richlane Drive

City Indianapolis State IN Zip Code 46236-9323

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

Name of Employer Gynecologic Oncology Of Indiana Occupation Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 25 / 2011
Transaction ID: 2011M02L11A101418
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. James Moore

Mailing Address 2925 Oldtown Valley Road S.W.

City New Philadelphia State OH Zip Code 44663-7840

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 01 / 21 / 2011
Transaction ID: 2011M02L11A101419
Amount of Each Receipt this Period 275.00

C. Full Name (Last, First, Middle Initial)
Mrs. Lisa Graham Moore

Mailing Address 3149 Clamdigger Lane

City Las Vegas State NV Zip Code 89117

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 18 / 2011
Transaction ID: 2011M02L11A101420
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► **1675.00**

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