

**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 6096 OF 11162
	<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

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

**A. MR. ROBERT MARTIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 20501 GOSHEN RD.

City State Zip Code  
GAITHERSBURG MD 20879-1602

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

Name of Employer Occupation  
CHAPLAIN ARCHDIOCESE OF WASHINGTON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
267.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 12 / 2014  
**Transaction ID : 201430GL11A117185**

Amount of Each Receipt this Period  
10.00

**B. DR. SAMUEL P. MARTIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 E. WASHINGTON STREET

City State Zip Code  
ORLANDO FL 32801-2128

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

Name of Employer Occupation  
PHYSICIAN SELF-EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2014  
**Transaction ID : 201430GL11A117186**

Amount of Each Receipt this Period  
250.00

**C. MR. SEAN MARTIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 145 OXFORD ROAD

City State Zip Code  
KENILWORTH IL 60043-1265

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2014  
**Transaction ID : 201430GL11A117187**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 760.00

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