

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

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

FOR LINE NUMBER: PAGE 293 OF 70573

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CIOLINO, ELIZABETH, , MS.,**

Mailing Address 3648 S. HOYNE AVE.

City  
CHICAGO

State  
IL

Zip Code  
60609-1146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2019

Transaction ID : SA11A.84123785

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CIORDA, AURORA, , MS.,**

Mailing Address 4389 BROMYARD AVE.

City  
WEST CHESTER

State  
OH

Zip Code  
45241-3610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMANO CINCINNATI, INC.

Occupation (for Individual)  
PCB INSPECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2019

Transaction ID : SA11A.84068174

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CIPPARULO, MICHAEL, , MR.,**

Mailing Address 329 UNION HILL ROAD

City  
ENGLISHTOWN

State  
NJ

Zip Code  
07726-1844

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYCT

Occupation (for Individual)  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2019

Transaction ID : SA11A.84068396

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

65.00