

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

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

FOR LINE NUMBER: PAGE 1896 OF 70573

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. ADKISSON, JERRY, , ,

Mailing Address P.O. BOX 410

City
ROSEVILLE

State
IL

Zip Code
61473-0410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 03 / 2019

Transaction ID : SA11A.84147907

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. AFOA, MARC, , ,

Mailing Address 8000 BADURA AVE 2095

City
LAS VEGAS

State
NV

Zip Code
89113-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FREEMAN

Occupation (for Individual)
TEAMSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 03 / 2019

Transaction ID : SA11A.84162821

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. AGABALYAN, BELA, , DR.,

Mailing Address 3780 RIVERVIEW DR.

City
COLUMBUS

State
OH

Zip Code
43221-4909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTH CENTRAL

Occupation (for Individual)
PSYCHIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 03 / 2019

Transaction ID : SA11A.84141901

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

265.00