

# **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)

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☒ 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. BYRD, KEBRA, , ,**

Mailing Address 11730 LINDEN GROVE DRIVE

City  
FORT WAYNE

State  
IN

Zip Code  
46845-1959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2019

**Transaction ID : SA11A.84240015**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. BYRNE, AILEEN, , MRS.,**

Mailing Address 72 VISTA GRANDE DR.

City  
PINE HAVEN

State  
WY

Zip Code  
82721-9726

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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2019

**Transaction ID : SA11A.84258628**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. BYRNES, ROBERT, R., REV.,**

Mailing Address 2900 SEMINARY DRIVE

City  
GREENSBURG

State  
PA

Zip Code  
15601-3734

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2019

**Transaction ID : SA11A.84257886**

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

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

115.00