

# **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. DORTCH, PHILLIP, , MR.,**

Mailing Address 2302 S. 35TH STREET

City  
ABILENE

State  
TX

Zip Code  
79605-7020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF TEXAS

Occupation (for Individual)  
H.H.S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

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

**Transaction ID : SA11A.84254128**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

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

**B. DOTY, MICHAEL, , ,**

Mailing Address 26 OUR WAY 155 EID LANE

City  
KALISPELL

State  
MT

Zip Code  
59901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

**Transaction ID : SA11A.84239766**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. DOUGLAS, JAMES, W., MR.,**

Mailing Address 9802 MARY DELL LANE

City  
LOUISVILLE

State  
KY

Zip Code  
40291-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

**Transaction ID : SA11A.84238005**

Amount of Each Receipt this Period

105.00

☐ Memo Item  
CONTRIBUTION

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

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

170.00