

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

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

FOR LINE NUMBER: PAGE 8531 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. KEELTY, BRIAN, M., MR.,

Mailing Address 205 E. JOPPA ROAD #2203

City
TOWSON

State
MD

Zip Code
21286-3231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

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

Transaction ID : SA11A.84255740

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. KEIFER, DENNIS, J., MR.,

Mailing Address 206 BURLINGAME PL

City
JACKSONVILLE

State
NC

Zip Code
28540-2982

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 ▼

347.50

Date of Receipt

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

Transaction ID : SA11A.84257360

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. KEITH, JOHN, , MR.,

Mailing Address 2727 MCRAE RD

City
NORTH CHESTERFIELD

State
VA

Zip Code
23235-2377

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KEITH & KEITH ATTORNEY'S AT LAW

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

311.25

Date of Receipt

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

Transaction ID : SA11A.84257780

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

335.00

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