

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

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

FOR LINE NUMBER: PAGE 8762 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. PUTT, ROBERT, D., MR.,

Mailing Address 6811 CHERRY GROVE CIR.

City
ORLANDO

State
FL

Zip Code
32809-6661

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 ▼

407.25

Date of Receipt

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

Transaction ID : SA11A.84240287

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. QUALLS, KIMBERLY, LEE, MS.,

Mailing Address 925 HWY 22

City
SHILOH

State
TN

Zip Code
38376-4344

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.84239625

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. QUAST, JOHN, R., MR.,

Mailing Address 2979 TYLERSVILLE RD.

City
VILLAGE OF INDIAN SPRINGS

State
OH

Zip Code
45015

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 ▼

243.50

Date of Receipt

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

Transaction ID : SA11A.84253780

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

55.00

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