

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12762 OF 70573

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. STARK, MICHAEL, LEE, MR.,**

Mailing Address 821 E. GOORMAN AVENUE

City  
CENTENNIALState  
COZip Code  
80121-2430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
D.M.F.Occupation (for Individual)  
WELDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M	D D	Y Y Y Y
12	12	2019

Transaction ID : SA11A.84379735

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. STATZER, M., V., MR.,**

Mailing Address 3100 SHORE DR. APT P09

City  
VIRGINIA BEACHState  
VAZip Code  
23451-1165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
12	12	2019

Transaction ID : SA11A.84319904

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. STEGMA, ERNESTINE, B., MRS.,**Mailing Address 6401 OHIO DR  
APT 5302City  
PLANOState  
TXZip Code  
75024-6727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
12	12	2019

Transaction ID : SA11A.84321611

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

1300.00

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