

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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
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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. HUNDAHL, SCOTT, , DR.,**

Mailing Address 1961 WINDEMERE LANE

City  
SACRAMENTOState  
CAZip Code  
95864-1616FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VA AND UCDAVISOccupation (for Individual)  
SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2			2	0	1	9		

**Transaction ID : SA11A.84376027**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12221113.45

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2			2	0	1	9		

**Transaction ID : SA11C.84373159128950**

Amount of Each Receipt this Period

35.00

☒ Memo Item  
CONTRIBUTION
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED

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

**C. KELLEY, SCOTT, , MR.,**

Mailing Address P.O. BOX 181

City  
PEA RIDGEState  
ARZip Code  
72751-0181FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2			2	0	1	9		

**Transaction ID : SA11A.84376031**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00