

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

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

FOR LINE NUMBER: PAGE 18094 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. WADLE, RONALD, W., DR.,

Mailing Address 4008 VENDOME DR.

City
AUBURN HILLS

State
MI

Zip Code
48326-1866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMPREHENSIVE UROLOGY

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2019

Transaction ID : SA11A.84474414

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. WADSWORTH, HELEN, , MS.,

Mailing Address 12491 BRISTOW ROAD

City
NOKESVILLE

State
VA

Zip Code
20181-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2019

Transaction ID : SA11A.84473072

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. WADSWORTH, IDA, , MRS.,

Mailing Address 2191 N. SANDUSKY ROAD

City
SANDUSKY

State
MI

Zip Code
48471-9134

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2019

Transaction ID : SA11A.84480896

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

700.00