

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22198 OF 70573

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. ARNOLD, CARRIE, , MRS.,**

Mailing Address 5943 BORAH VIEW RD

City  
MACKAY

State  
ID

Zip Code  
83251-4901

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2019

**Transaction ID : SA11A.84582583**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. ARSHT, ALAN, M., MR.,**

Mailing Address 45 E 82ND ST

City  
NEW YORK

State  
NY

Zip Code  
10028-0326

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRIVATE INVESTOR

Occupation (for Individual)  
PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2019

**Transaction ID : SA11A.84567922**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. ARVA, JUDITH, , MRS.,**

Mailing Address 201 SHORT STREET

City  
HARRISBURG

State  
PA

Zip Code  
17109-3735

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 ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2019

**Transaction ID : SA11A.84656809**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

245.00