

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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. BLINKINSOP, DAVID, L., MR.,

Mailing Address 6551 WATERFORD CIRCLE

City
SARASOTAState
FLZip Code
34238-2637FEC 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 ▼

349.75

Date of Receipt

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

Transaction ID : SA11A.84581582

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. BLOOD, VINCENT, , , M.D.

Mailing Address 48 ACKERMAN PL

City
SCARSDALEState
NYZip Code
10583-5738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTCHESTER MEDICAL CENTEROccupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

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

Transaction ID : SA11A.84656835

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. BOBACEK, JUDITH, C., MS.,

Mailing Address 7325 HUGHES RD.

City
RAVENNAState
OHZip Code
44266-9271FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PORTAGE COUNTY, OHIOOccupation (for Individual)
SPECIAL NEEDS AIDE FOR CHILDREN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

382.25

Date of Receipt

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

Transaction ID : SA11A.84580093

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

120.00

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