

# **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)

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☒ 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. STANSFIELD, CHARLES, W., DR.,**

Mailing Address 10713 MIST HAVEN TERRACE

City  
ROCKVILLE

State  
MD

Zip Code  
20852-3438

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 ▼

660.00

Date of Receipt

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

**Transaction ID : SA11A.84656776**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. STANTON, CLARA, E., MRS.,**

Mailing Address 4392 WEST 62ND STREET

City  
CLEVELAND

State  
OH

Zip Code  
44144-2851

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 ▼

323.50

Date of Receipt

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

**Transaction ID : SA11A.84580132**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**C. STASHIK, DAVID, HENRY, MR.,**

Mailing Address 1507 EDITH STREET

City  
BERKELEY

State  
CA

Zip Code  
94703-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

334.75

Date of Receipt

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

**Transaction ID : SA11A.84657186**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

140.00

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