

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23437 OF 70573

(check only one)

<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. SPENGLER, DAN, MICHAEL, DR.,

Mailing Address 5400 STANFORD DRIVE

City
NASHVILLEState
TNZip Code
37215-4236FEC 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 ▼

5400.00

Date of Receipt

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

Transaction ID : SA11A.84828807

Amount of Each Receipt this Period

250.00

☐ 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
12	23	2019

Transaction ID : SA11C.84568246218512

Amount of Each Receipt this Period

100.00

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

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

C. WILLIAMS, DAN, , MR.,

Mailing Address 9030 W. FORT ISLAND TRAIL

City
CRYSTAL RIVERState
FLZip Code
34429-2412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
F&H CONTRACTORSOccupation (for Individual)
OWNER OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

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

Transaction ID : SA11A.84828814

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

350.00