

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

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

FOR LINE NUMBER: PAGE 24194 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. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC 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

12 / 23 / 2019

Transaction ID : SA11C.84568246222706

Amount of Each Receipt this Period

50.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

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

B. ANDERSON, KIMBERLY, , DR.,

Mailing Address 25085 CATHEDRAL

City
REDFORD

State
MI

Zip Code
48239-1567

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
VCA BEECH ROAD ANIMAL HOSPITAL

Occupation (for Individual)
VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.75

Date of Receipt

12 / 23 / 2019

Transaction ID : SA11A.84833008

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC 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

12 / 23 / 2019

Transaction ID : SA11C.84568246222715

Amount of Each Receipt this Period

25.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

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

50.00

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