

# **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. 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

M M / D D / Y Y Y Y Y Y  
12 / 24 / 2019

**Transaction ID : SA11C.84599726262663**

Amount of Each Receipt this Period

20.00

☒ Memo Item

CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED

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

## **B. GUNNOE, PATRICIA, , MS.,**

Mailing Address 62B TOWNSHIP ROAD 1436

City  
SOUTH POINT

State  
OH

Zip Code  
45680-8721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIVER PARK HOSPITAL

Occupation (for Individual)  
NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 24 / 2019

**Transaction ID : SA11A.84963605**

Amount of Each Receipt this Period

20.00

☐ 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

M M / D D / Y Y Y Y Y Y  
12 / 24 / 2019

**Transaction ID : SA11C.84599726262665**

Amount of Each Receipt this Period

100.00

☒ Memo Item

CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED

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

20.00

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