

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

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

FOR LINE NUMBER: PAGE 30244 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. DANIELS, WALTER, C., MR.,**

Mailing Address 7751 SHADYWOODS COURT

City  
CINCINNATI

State  
OH

Zip Code  
45244-2832

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2019

Transaction ID : SA11A.84635946

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. DANKU, WILLIAM, , MR.,**

Mailing Address 3 BROMLEY LN

City  
MANCHESTER TOWNSHIP

State  
NJ

Zip Code  
08759-7324

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2019

Transaction ID : SA11A.84605968

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. DANTE, MARIE, , MS.,**

Mailing Address 11505 N. BAYSHORE DR.

City  
MIAMI

State  
FL

Zip Code  
33181-3247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
TRAVEL CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

553.75

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2019

Transaction ID : SA11A.84640126

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

200.00

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