

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

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

FOR LINE NUMBER: PAGE 30795 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. PAPADOPOULOS, ROSE, , MRS.,

Mailing Address 445 WEST STREET

City
HARRISON

State
NY

Zip Code
10528-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IZZO ELECTRIC INC

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

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

Transaction ID : SA11A.84638062

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. PAPUDESU, MOHAN, , DR.,

Mailing Address 108 COUNTRY CLUB DRIVE, APT F

City
AMERICUS

State
GA

Zip Code
31709-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARE CONNECT HEALTH INC

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : SA11A.84603236

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. PARANA, GERALDINE, J., MRS.,

Mailing Address 30234 AVENIDA DE CALMA

City
PLS VRDS PNSL

State
CA

Zip Code
90275-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

601.00

Date of Receipt

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

Transaction ID : SA11A.84606007

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

300.00

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