

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

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

FOR LINE NUMBER: PAGE 32860 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. MCNEAL, JIM, D., MR.,**

Mailing Address 419 OLD KINGS BRIDGE RD

City  
NICHOLSON

State  
GA

Zip Code  
30565-2060

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 ▼

362.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 30 / 2019

Transaction ID : SA11A.84660849

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. MCNEIL, TERRENCE, L., MR.,**

Mailing Address 13166 NORTH ROAD

City  
FENTON

State  
MI

Zip Code  
48430-1085

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 30 / 2019

Transaction ID : SA11A.84652328

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

**C. MCPEAK, DAVID, , MR.,**

Mailing Address 4498 CHELISE HAMLET ROAD

City  
SYRACUSE

State  
NY

Zip Code  
13215-9668

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCPEAK COMPANY INC

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 30 / 2019

Transaction ID : SA11A.84661727

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

440.00