

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

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

FOR LINE NUMBER: PAGE 34702 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. HARVEY, SHERYL, , MS.,

Mailing Address 106 STARTHISTLE DR.

City
SHADY SPRING

State
WV

Zip Code
25918-8430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOVED ONES IN HOME CARE

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2019

Transaction ID : SA11A.84845708

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. HARWELL, GABRIEL, , ,

Mailing Address 1126 N 1050 W

City
OREM

State
UT

Zip Code
84057-2861

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HADCO

Occupation (for Individual)
CONCRETE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2019

Transaction ID : SA11A.84845709

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. HASHMAN, RAY, , ,

Mailing Address P.O. BOX 49517

City
LOS ANGELES

State
CA

Zip Code
90049-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2351.93

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2019

Transaction ID : SA11A.84847391

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

115.00

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