

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

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

 FOR LINE NUMBER: PAGE 16 OF 60  
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)**

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

**A. GEE 945, NANCY Y, ,**

Mailing Address 42625 FERN CIR

 City  
 FREMONT

 State  
 CA

 Zip Code  
 94538

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 CTP

 Occupation (for Individual)  
 VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2019

Transaction ID : SA11AI.25300

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. GILLOGLY 437, BRONSON R, , MR,**

Mailing Address 1258 GREENWOOD AVE APT 16

 City  
 ZANESVILLE

 State  
 OH

 Zip Code  
 43701

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 NONE

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2019

Transaction ID : SA11AI.26247

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. GORMAN 449, JAMES, , MR,**

Mailing Address PO BOX 2599

PO BOX 2599

 City  
 MANSFIELD

 State  
 OH

 Zip Code  
 44906

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 GORMAN RUPP CO

 Occupation (for Individual)  
 CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2019

Transaction ID : SA11AI.26074

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

850.00