

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Mississippi Republican Party**

**A. Barbour, Haley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 648 Dogwood Dr  
 City Yazoo City State MS Zip Code 39194-8205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Butler, Snow And O'mara Occupation (for Individual) Development Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 10 / 2020  
**Transaction ID : A2631060F0EC84C24B05**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Barbour, Henry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 685 Woodland Dr  
 City Yazoo City State MS Zip Code 39194-9710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Capitol Resources, LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2020  
**Transaction ID : A895BD304354B450B9E4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Barnes, Anna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3980 Council Cir  
 City Jackson State MS Zip Code 39206-5811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) University Medical Center Occupation (for Individual) Nurse  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 10 / 2020  
**Transaction ID : A89A955CA2A6E48BC8CC**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<b>TOTAL</b> This Period (last page this line number only).....	