

# **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 4167 OF 12287

☒ 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. MILLER, ARTHUR, , MR.,**

Mailing Address 36484 MANCHAC WAY AVE

City  
PRAIRIEVILLE

State  
LA

Zip Code  
70769-3263

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARTHUR ROWE & CO., INC

Occupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2017

**Transaction ID : SA11A.72639426**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. MILLER, CAROLINE, CORDELIA, ,**

Mailing Address 13307 MARQUISE DR.

City  
HAGERSTOWN

State  
MD

Zip Code  
21742-2679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2017

**Transaction ID : SA11A.72647303**

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

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

**C. MILLER, DONALD, P., MR.,**

Mailing Address P.O. BOX 1158

City  
FOSTORIA

State  
OH

Zip Code  
44830-1158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROPPE HOLDING COMPANY

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2017

**Transaction ID : SA11A.72646745**

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

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

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

1001.00