

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

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

FOR LINE NUMBER: PAGE 7770 OF 12287

(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. DAVIS, ROBERT, D., MR.,**

Mailing Address P.O. BOX 488

City  
MARSHVILLE

State  
NC

Zip Code  
28103-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2017

**Transaction ID : SA11A.72733518**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

**B. DAVIS, WANDA, L., MRS.,**

Mailing Address 419 WHITE MTN. MEADOWS DR.

City  
RUIDOSO

State  
NM

Zip Code  
88345-5814

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 ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2017

**Transaction ID : SA11A.72732353**

Amount of Each Receipt this Period

51.00

☐ Memo Item  
CONTRIBUTION

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

**C. DAVIS, WILLIAM, C., MR.,**

Mailing Address 6 DORAL DRIVE

City  
SHALIMAR

State  
FL

Zip Code  
32579-1612

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2017

**Transaction ID : SA11A.72733718**

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

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

53.00