

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

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

FOR LINE NUMBER: PAGE 204 OF 17017

(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. BUTLER, WILLIAM, , MR.,

Mailing Address 255 N SIERRA ST UNIT 1906

City
RENO

State
NV

Zip Code
89501-1356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEXT LEVEL ASSOC. SOLUTIONS

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11A.77715095

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. CECH, ROXANNE, MICHELLE, DR.,

Mailing Address 120 BRENTWOOD ST

City

MARIETTA

State

OH

Zip Code

45750-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEMORIAL HEALTH SYSTEM

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11A.77721199

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. CLAYPOOL, MARJORIE, ANN, MS.,

Mailing Address 3909 W KELTON LN

City

PHOENIX

State

AZ

Zip Code

85053-2712

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11A.77714904

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

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

900.00