

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 895 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. BRODIE, STU, , ,

Mailing Address 13033 DECANT DRIVE

City
POWAYState
CAZip Code
92064-1118FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AHAVA ASSOCIATES INCOccupation (for Individual)
SALES

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
01 / 15 / 2019

Transaction ID : SA11A.77825514

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. BROWN, DEBRA, J., MS.,

Mailing Address 3541 ALKEN STREET

City
BAKERSFIELDState
CAZip Code
93308-5153FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - EMPLOYEDOccupation (for Individual)
GARDENER / LANDSCAPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11A.77828144

Amount of Each Receipt this Period

275.00

☐ Memo Item
CONTRIBUTION

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

C. BROWN, EVELYN, J., MS.,

Mailing Address 7509 FLAGSTONE STREET

City
FORT WORTHState
TXZip Code
76118-6953FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAPELLON PHARMCEUTICALSOccupation (for Individual)
VP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11A.77829893

Amount of Each Receipt this Period

275.00

☐ Memo Item
CONTRIBUTION

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

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

800.00