

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. STEWART, N, , ,

Mailing Address PO BOX 4130

City
SHREVEPORTState
LAZip Code
71134Purpose of Disbursement
REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB28A-0.059**

Amount of Each Disbursement this Period

300.00

2018 AGGREGATE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DUPUY, RONALD, , ,

Mailing Address 3872 REEDDEER TRAIL

City
BROOMFIELDState
COZip Code
80020Purpose of Disbursement
REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB28A-0.059**

Amount of Each Disbursement this Period

10.00

2018 AGGREGATE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HABER, RAVEN, , ,

Mailing Address 9060 PALISADE AVE 917

City
NORTH BERGENState
NJZip Code
07047Purpose of Disbursement
REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB28A-0.059**

Amount of Each Disbursement this Period

450.00

2018 AGGREGATE

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

760.00