

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3719 OF 12646

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 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. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7488087.73

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		07		2020

Transaction ID : SA11C.86549563358854

Amount of Each Receipt this Period

100.00

☒ Memo Item
 CONTRIBUTION
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

B. NELSON, JOEL, , MR.,

Mailing Address P.O. BOX 863

City
KENOState
ORZip Code
97627-0863FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SKY LAKES MEDICAL CENTEROccupation (for Individual)
MEDICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		07		2020

Transaction ID : SA11A.86555098

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7488087.73

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		07		2020

Transaction ID : SA11C.86549563358855

Amount of Each Receipt this Period

100.00

☒ Memo Item
 CONTRIBUTION
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

100.00