

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

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

FOR LINE NUMBER: PAGE 28 OF 193

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. ROBERTSON, JOHN, , ,

Mailing Address 20702 US HWY. 23

City
CHILLICOTHE

State
OH

Zip Code
45601-9016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFOSIGHT CORP

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11A.1734121

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. SCHLOTMAN, CARL, R., MR., JR.

Mailing Address 8551 NEW ENGLAND CT.

City
CINCINNATI

State
OH

Zip Code
45236-2093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAI INSURANCE

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11A.1734734

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. SEANOR, GEORGE, , MR.,

Mailing Address 338 ROSE LANE ST. SW

City
NORTH CANTON

State
OH

Zip Code
44720-3556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KOKOSING CONSTRUCTION CO.

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11A.1734756

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

1500.00