

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

FOR LINE NUMBER: PAGE 2320 OF 3324

(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 (Last, First, Middle Initial)

**A. DR. VERNON D. HOLLEMAN**

Mailing Address 600 S. 25TH STREET

City  
TEMPLEState  
TXZip Code  
76504-5227FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCOTT WHITE CLINIC

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

Transaction ID : SA11A.65407691

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DR. LES M. HOLVE**Mailing Address 5555 MONTGOMERY DR.  
P202

City

SANTA ROSA

State

CA

Zip Code

95409-8846

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

Transaction ID : SA11A.65407291

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. JOHN WILLIAM HUNT**Mailing Address 1244 ARBOR ROAD  
#513

City

WINSTON SALEM

State

NC

Zip Code

27104-1148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

Transaction ID : SA11A.65407928

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

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

450.00