

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

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

FOR LINE NUMBER: PAGE 469 OF 8857

(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. ROSS, ELIZABETH, ANN, MS.,

Mailing Address 1502 S. BOULDER AVE.
 APT. 11K

City
 TULSA

State
 OK

Zip Code
 74119-4023

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : SA11A.79089911

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

B. ROTH, JOY, M., ,

Mailing Address 2933 COHO DR.

City

PORT CLINTON

State

OH

Zip Code

43452-3344

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 ROTH & BACON LLC

Occupation (for Individual)
 SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : SA11A.79086991

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

C. ROTHACKER, GERALD, W., DR., JR.

Mailing Address 817 WOODFIELD DRIVE

City

LITITZ

State

PA

Zip Code

17543-8377

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 ORTHOPEDIC ASSOC. OF LANCASTER

Occupation (for Individual)
 ORTHOPEDIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : SA11A.79083016

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

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

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

450.00