

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

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

FOR LINE NUMBER:
(check only one)

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☒ 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. MORRISS, DANIELLE, , ,

Mailing Address 223 E FRONT ST

City
CLARE

State
IA

Zip Code
50524-7613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRAVEL NURSING

Occupation (for Individual)
TRAVEL NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : SA11A.79479112

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MORRIS, GENE, , DR.,

Mailing Address 1547 S HIGGINS AVE

City
MISSOULA

State
MT

Zip Code
59801-4226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
ORAL & MAXILLOFACIAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : SA11A.79450106

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

C. MORROW, DANIEL, V., MR.,

Mailing Address 108 NATURAL BRIDGE

City
HARTSELLE

State
AL

Zip Code
35640-5263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUSCORR LLC

Occupation (for Individual)
OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

358.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : SA11A.79479114

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

500.00