

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

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

FOR LINE NUMBER: PAGE 7881 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. LEWIS, BOBBY, , MR.,**

Mailing Address 5316 SANTA TERESA DR.

City  
EL PASO

State  
TX

Zip Code  
79932-2538

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEPT OF VETERANS AFFAIRS

Occupation (for Individual)  
SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11A.79618142

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. LEWIS, HARLEY, E., MR.,**

Mailing Address 5619 BAYSHORE RD  
LOT 358

City  
PALMETTO

State  
FL

Zip Code  
34221-9225

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11A.79618143

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. LEWIS, KATHY, , MS.,**

Mailing Address P.O. BOX 631

City  
GRATIS

State  
OH

Zip Code  
45330-0631

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 ▼

347.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11A.79618147

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

110.00