

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

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

FOR LINE NUMBER: PAGE 2358 OF 31559

(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. ROTT, DAVID, JOSEPH, MR.,**

Mailing Address 4267 N. COLE ST

City  
LIMA

State  
OH

Zip Code  
45807-9516

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 ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

Transaction ID : SA11A.82627636

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

**B. ROTTSCHAFER, MARY, , ,**

Mailing Address 9275 ADAMS STREET

City

ZEELAND

State

MI

Zip Code

49464-9079

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRITTER BARN

Occupation (for Individual)  
FARM EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

Transaction ID : SA11A.82432722

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. ROUNTREE, SHARON, , MS.,**

Mailing Address 9604 FOX HILL DR.

City

FORT WORTH

State

TX

Zip Code

76131-4246

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 ▼

292.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

Transaction ID : SA11A.82406162

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

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

85.00