

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

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

FOR LINE NUMBER: PAGE 2666 OF 31559

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REPUBLICAN NATIONAL COMMITTEE**

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

**A. STROLE, CATHY, , ,**

Mailing Address 719 S SCHOOL ST

City  
BROWNSBURG

State  
IN

Zip Code  
46112-1667

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MHS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

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

Transaction ID : SA11A.82427728

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

**B. STROLLO, LISA, , MS.,**

Mailing Address 80 NEW POINT PLACE

City  
AMITYVILLE

State  
NY

Zip Code  
11701-3916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

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

Transaction ID : SA11A.82453685

Amount of Each Receipt this Period

36.00

☐ Memo Item  
CONTRIBUTION

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

**C. STROM, KRISTIE, M., MISS,**

Mailing Address 1482 PEACOCK RD

City  
PARIS

State  
KY

Zip Code  
40361-8852

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2806.82

Date of Receipt

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

Transaction ID : SA11A.82489059

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

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

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

42.00