

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

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

FOR LINE NUMBER: PAGE 15103 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. HASTE, SHARON, M., MS.,**

Mailing Address 7122 QUAY STREET

City  
ARDADA

State  
CO

Zip Code  
80003-3537

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2019

Transaction ID : SA11A.82924245

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. HATOK, HAMILTON, L., MR.,**

Mailing Address 3325 S BAKER ST

City  
SANTA ANA

State  
CA

Zip Code  
92707-3823

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 ▼

442.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2019

Transaction ID : SA11A.82927907

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. HAWKINS, DONALD, R., MR.,**

Mailing Address 2649 GRAND TETON AVE

City  
HEMET

State  
CA

Zip Code  
92544-3289

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RIVERSIDE COUNTY

Occupation (for Individual)  
EDUCATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2019

Transaction ID : SA11A.82931709

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

260.00