

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

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

FOR LINE NUMBER: PAGE 15741 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. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5632068.54

Date of Receipt

10 / 09 / 2019

Transaction ID : **SA11C.83071424260352**

Amount of Each Receipt this Period

45.00

☒ Memo Item
 CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED

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

B. SIMMONS, PAMELA, , ,

Mailing Address 434 STONER

City
CLINTON

State
OH

Zip Code
44216-9634

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 ▼

595.00

Date of Receipt

10 / 09 / 2019

Transaction ID : **SA11A.83073109**

Amount of Each Receipt this Period

45.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5632068.54

Date of Receipt

10 / 09 / 2019

Transaction ID : **SA11C.83071424260354**

Amount of Each Receipt this Period

50.00

☒ Memo Item
 CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED

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

45.00

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