

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. SANSON, JEFFREY, A., MR.,**

Mailing Address 2275 FALLEN OAKS

City  
WESTLAKE

State  
OH

Zip Code  
44145-4385

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE SANSON CO.

Occupation (for Individual)  
FOOD DIST.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

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

Transaction ID : SA11A.83023163

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

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

**B. SANSOM, JOHN, M., MR.,**

Mailing Address 9455 B PENSACOLA BOULEVARD SUITE B

City  
PENSACOLA

State  
FL

Zip Code  
32534-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN M. SANSOM, P.A.

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.82729160

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. SANTANA, DORIS, C., MS.,**

Mailing Address 2149 WAVERLEY STREET

City  
PALO ALTO

State  
CA

Zip Code  
94301-3955

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1115.00

Date of Receipt

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

Transaction ID : SA11A.82728964

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

5500.00