

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

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

FOR LINE NUMBER: PAGE 18408 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. FONTAINE, CHRISTOPHER, , MR.,**

Mailing Address 10640 NW 10TH ST RD

City  
OCALA

State  
FL

Zip Code  
34482-6978

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 ▼

638.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : SA11A.83250998**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

**B. FONTENO, LYNN, S., MRS.,**

Mailing Address 13021 W. GELDING DRIVE

City  
EL MIRAGE

State  
AZ

Zip Code  
85335-4373

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : SA11A.83159211**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. FORAN, NANCY, L., MRS.,**

Mailing Address 50 STATE ROUTE 99 NORTH

City  
WILLARD

State  
OH

Zip Code  
44890-9357

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 ▼

342.25

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : SA11A.83188322**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

135.00