

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

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

FOR LINE NUMBER: PAGE 22170OF 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. WUEBBELS, JEAN, ANN, MS.,

Mailing Address 8783 N ELIZABETH SCALES MOUND RD

City
SCALES MOUND

State
IL

Zip Code
61075-9707

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 ▼

812.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2019

Transaction ID : SA11A.83095020

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

B. 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

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2019

Transaction ID : SA11C.83094783276864

Amount of Each Receipt this Period

5.00

☒ Memo Item
CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

C. COLEGROVE, KIM, S., MRS.,

Mailing Address 3566 WARREN RD.

City
CLEVELAND

State
OH

Zip Code
44111-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WELDON PUMP

Occupation (for Individual)
BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2019

Transaction ID : SA11A.83095032

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

50.00