

# **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. BUTRAM, NANCY, R., MRS.,**

Mailing Address 126 W. 5TH ST

City

BELVIDERE

State

IL

Zip Code

61008-5335

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

Transaction ID : SA11A.83307613

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

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

**B. BYBEE, STEWART, J., MR.,**

Mailing Address 5330 AKES DRIVE

City

CHEYENNE

State

WY

Zip Code

82009-4018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WYOMING STATE GOVERNMENT

Occupation (for Individual)

IT MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

Transaction ID : SA11A.82940663

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. BYE, ALDEN, D., MR.,**

Mailing Address 2821 36TH AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55406-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2019

Transaction ID : SA11A.83306323

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

265.00

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