

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

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

FOR LINE NUMBER: PAGE 23775 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. SPITLER, KAREN, , MRS.,**

Mailing Address 841 TERRACE DR.

City  
UPPER SANDUSKY

State  
OH

Zip Code  
43351-9311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UPPER SANDUSKY SCHOOLS

Occupation (for Individual)  
BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2019

Transaction ID : SA11A.82968498

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. SPROULE, DIANE, MARIE, MRS.,**

Mailing Address 1777 PLACID CT SE

City  
CALEDONIA

State  
MI

Zip Code  
49316-9049

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2019

Transaction ID : SA11A.82968499

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. SPRUIELL, GRAHAM, , ,**

Mailing Address 248 NASTASKET RD

City  
HULL

State  
MA

Zip Code  
02045-2630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PSYCHIATRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

302.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2019

Transaction ID : SA11A.82968212

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

125.00