

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. GARNER, JOHN, P., MR.,

Mailing Address 333 LAS OLAS WAY APT 3007

City
FORT LAUDERDALEState
FLZip Code
33301-2390FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2019

Transaction ID : SA11A.83385361

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

B. GARY, CHARLES, RAY, MR.,

Mailing Address 104 COUNTY ROAD 4699

City
BOYDState
TXZip Code
76023-4269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOLIDAY INN EXPRESSOccupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2019

Transaction ID : SA11A.83117460

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

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

C. GASKILL, HAROLD, V., MR., III

Mailing Address 7235 LANE PARK DRIVE

City
DALLASState
TXZip Code
75225-2400FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIRST BAPTIST MEDICAL CENTEROccupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2019

Transaction ID : SA11A.83378665

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

235.00