

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

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

FOR LINE NUMBER: PAGE 26953 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. GIFFIN, ALYSIA, RAE, MRS.,

Mailing Address 1872 ALPENGLOW LN

City
LINCOLN

State
CA

Zip Code
95648-8475

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 BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 28 / 2019

Transaction ID : SA11A.83462071

Amount of Each Receipt this Period

205.00

☐ Memo Item
CONTRIBUTION

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

B. GIFFORD, CURT, WILLIAM, MR.,

Mailing Address 905 CAMEL DR
APT 212

City
GILLETTE

State
WY

Zip Code
82716-4942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SMITHS FOOD & DRUG

Occupation (for Individual)

STORE CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 28 / 2019

Transaction ID : SA11A.83468034

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. GIFFORD, GLADYS, L., MRS.,

Mailing Address P.O. BOX 10

City
ROSE CITY

State
MI

Zip Code
48654-0010

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 ▼

235.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 28 / 2019

Transaction ID : SA11A.83448509

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

260.00

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