

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

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

FOR LINE NUMBER: PAGE 34 OF 194

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. LINSALATA, FRANK, N., ,

Mailing Address 875 ANDREWS LN.

City
GATES MILLS

State
OH

Zip Code
44040-9648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LINSALATA CAPITAL PARTNERS

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.1727776

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. LUCCI, EUGENE, A., ,

Mailing Address 11535 MONARCH CT.

City
PAINESVILLE

State
OH

Zip Code
44077-8517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF OHIO

Occupation (for Individual)
COMMON PLEAS JUDGE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2019

Transaction ID : SA11A.1727542

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

C. LYNCH, BECKY, , ,

Mailing Address 8040 KING MEMORIAL ROAD

City
MENTOR

State
OH

Zip Code
44060-7331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEC ADVERTISING

Occupation (for Individual)
MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 03 / 2019

Transaction ID : SA11A.1727391

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

850.00