

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use 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. HAENGEL, GUSTAVO, , DR.,**

Mailing Address 284 CONSTITUTION ST

City  
CANTONState  
MIZip Code  
48188-6719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
H A E, INC.Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M	D D	Y Y Y Y
06	03	2019

**Transaction ID : SA11A.80061526**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. HAENGEL, GUSTAVO, , DR.,**

Mailing Address 284 CONSTITUTION ST

City  
CANTONState  
MIZip Code  
48188-6719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
H A E, INC.Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M	D D	Y Y Y Y
06	03	2019

**Transaction ID : SA11A.80064838**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. HAFER, CARL, W., MR.,**

Mailing Address 5889 SQUIRRELSNEST LANE

City  
CINCINNATIState  
OHZip Code  
45252-1049FEC 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 ▼

212.50

Date of Receipt

M M	D D	Y Y Y Y
06	03	2019

**Transaction ID : SA11A.80054046**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶

155.00

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