

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

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

FOR LINE NUMBER: PAGE 673 OF 27332

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. MORRIS, DOUGLAS, L., MR.,

Mailing Address 607 SKYLINE AVE

City
KILLEEN

State
TX

Zip Code
76541-7950

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 ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11A.80060338

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MORRIS, KENNETH, , MR.,

Mailing Address 307 LAWSON DR.

City

BLOUNTVILLE

State

TN

Zip Code

37617-6863

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DISABLED

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11A.80078528

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

C. MORRIS, MARIA, , ,

Mailing Address 2021 S PENINSULA DR.

City

DAYTONA BEACH

State

FL

Zip Code

32118-5227

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 ▼

310.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11A.80082133

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

85.00