

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

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

FOR LINE NUMBER: PAGE 3720 OF 27332

(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. MAY, BRENDA, , MS.,

Mailing Address 6808 SOUTHTON DR.

City
PARMA

State
OH

Zip Code
44129-5151

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 ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : SA11A.80176163

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MAY, LAURA, A., MS.,

Mailing Address 26804 N 70TH PLACE

City

SCOTTSDALE

State

AZ

Zip Code

85266-8824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : SA11A.80220979

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. MAY, LAURA, A., MS.,

Mailing Address 26804 N 70TH PLACE

City

SCOTTSDALE

State

AZ

Zip Code

85266-8824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

256.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : SA11A.80223854

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

105.00

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