

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

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

FOR LINE NUMBER: PAGE 4203 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. FRANCIS, RICHARD, LYNN, MR.,**

Mailing Address P.O. BOX 152

City  
SAINT JOSEPH

State  
MI

Zip Code  
49085-0152

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2019

Transaction ID : SA11A.80214254

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

**B. FRANCE, SHERROD, W., MR.,**

Mailing Address P.O. BOX 607

City  
RAWLINS

State  
WY

Zip Code  
82301-0607

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 ▼

623.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2019

Transaction ID : SA11A.80226861

Amount of Each Receipt this Period

65.00

☐ Memo Item  
CONTRIBUTION

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

**C. FRANK, MERCEDES, W., MS.,**

Mailing Address 1620 GUERNSEYTOWN ROAD

City  
WATERTOWN

State  
CT

Zip Code  
06795-1234

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 ▼

281.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2019

Transaction ID : SA11A.80210614

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

130.00