

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

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

FOR LINE NUMBER: PAGE 4809 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. SMITH, GAYLE, B., MRS.,

Mailing Address 1425 W LAKE MARY BLVD

City
LAKE MARY

State
FL

Zip Code
32746-3611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORLANDO HEALTH

Occupation (for Individual)
DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : SA11A.80250980

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. SMITH, GEOFFREY, , ,

Mailing Address 303 BROADWAY ST 104 140

City
LAGUNA BEACH

State
CA

Zip Code
92651-1816

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : SA11A.80250463

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. SMITH, JOSEPH, B., MR.,

Mailing Address 4 SANDY COVE ROAD

City
CLOVER

State
SC

Zip Code
29710-8930

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WATACO

Occupation (for Individual)
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : SA11A.80240453

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

160.00

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