

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

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

FOR LINE NUMBER: PAGE 5164 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. PAPPAS, JAMES, FRANK, MR.,

Mailing Address 5905 BROCKTON AVE STE C

City
RIVERSIDE

State
CA

Zip Code
92506-1887

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
E.C.S. IMAGING, INC.

Occupation (for Individual)
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1203.75

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11A.80259431

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

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

B. PAPUDESU, MOHAN, , DR.,

Mailing Address 108 COUNTRY CLUB DRIVE
APT F

City
AMERICUS

State
GA

Zip Code
31709-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARE CONNECT HEALTH INC

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11A.80279258

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. PARDUN, DAVID, N., MR.,

Mailing Address 256 INVERNESS

City
HIGHLAND

State
MI

Zip Code
48357-4770

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 BES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11A.80257173

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

520.00