

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

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

FOR LINE NUMBER: PAGE 5812 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. WRIGHT, MARTHA, R., MS.,**

Mailing Address 79 BEECHWOOD ROAD

City  
HALIFAX

State  
MA

Zip Code  
02338-1514

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 17 / 2019

Transaction ID : SA11A.80271072

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. WU, JENNIFER, , MS.,**

Mailing Address 1416 MOUNTAIN MEADOW DR.

City  
OCEANSIDE

State  
CA

Zip Code  
92056-2226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HARVEST RANCH

Occupation (for Individual)  
CASHIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 17 / 2019

Transaction ID : SA11A.80380296

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. WU, JOSEPH, , MR.,**

Mailing Address 2404 GRAPEVINE DR.

City  
OXNARD

State  
CA

Zip Code  
93036-1575

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  
06 / 17 / 2019

Transaction ID : SA11A.80264183

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

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

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

130.00