

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. CHANG, CHI, H., MRS.,

Mailing Address 2495 LARKEY LANE

City  
WALNUT CREEK

State  
CA

Zip Code  
94597-2910

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 ▼

1000.00

Date of Receipt

06 / 19 / 2019

Transaction ID : SA11A.80362513

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. CHAPEL, HAROLD, L., MR.,

Mailing Address 4667 WEST 21ST STREET CIRCLE

City  
GREELEY

State  
CO

Zip Code  
80634-3265

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 ▼

450.00

Date of Receipt

06 / 19 / 2019

Transaction ID : SA11A.80368554

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

C. CHECHOURKA, CHERIE, , ,

Mailing Address 11701 FM 1061

City  
AMARILLO

State  
TX

Zip Code  
79124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

VA MEDICAL CENTER

Occupation (for Individual)

PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.24

Date of Receipt

06 / 19 / 2019

Transaction ID : SA11A.80492552

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

1235.00