

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

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

FOR LINE NUMBER: PAGE 7125 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. HARTSHORN, BEVERLY, S., MS.,**

Mailing Address 2415 5TH ST APT 140

City  
SANGER

State  
CA

Zip Code  
93657-2271

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 19 / 2019

Transaction ID : SA11A.80372160

Amount of Each Receipt this Period

115.00

☐ Memo Item  
CONTRIBUTION

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

**B. HASHMAN, RAY, , ,**

Mailing Address P.O. BOX 49517

City  
LOS ANGELES

State  
CA

Zip Code  
90049-0517

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 19 / 2019

Transaction ID : SA11A.80493838

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. HASKIN, KAY, , MRS.,**

Mailing Address 1649 SHIRLEY CT

City  
MODESTO

State  
CA

Zip Code  
95358-1620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

386.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 19 / 2019

Transaction ID : SA11A.80372211

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

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

260.00