

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7182 OF 27332

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. KANE, MIKE, M., MR.,Mailing Address 2300 LAKEVIEW PARKWAY
SUITE 700City
ALPHARETTAState
GAZip Code
30009-9066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	D D	Y Y Y Y
06	19	2019

Transaction ID : SA11A.80499779

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. KAPPELLA, KAREN, , ,

Mailing Address 1360 AVERY PL

City
SILOAM SPRINGSState
ARZip Code
72761-2235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEPEE RIDGE RANCHOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M	D D	Y Y Y Y
06	19	2019

Transaction ID : SA11A.80498223

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. KARPUS, ANTHONY, , ,

Mailing Address 7226 CONLEY ST

City
BALTIMOREState
MDZip Code
21224-1902FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
M9 SOLUTIONSOccupation (for Individual)
COMPUTER ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
06	19	2019

Transaction ID : SA11A.80499781

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

250.00

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