

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

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

FOR LINE NUMBER: PAGE 7658 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. CAMP, JOAN, , MS.,**

Mailing Address 49-51 KAMEHAMEHA HWY

City  
KANE OHE

State  
HI

Zip Code  
96744-5112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ATTN. SEALS CO. INC.

Occupation (for Individual)  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 20 / 2019

Transaction ID : SA11A.80430139

Amount of Each Receipt this Period

400.00

☐ Memo Item  
CONTRIBUTION

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

**B. CAMPBELL, BEVERLY, JELINEK, MS.,**

Mailing Address 13040 LOBLOLLY LN S

City  
JACKSONVILLE

State  
FL

Zip Code  
32246-4171

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 ▼

645.00

Date of Receipt

MM / DD / YYYY  
06 / 20 / 2019

Transaction ID : SA11A.80517696

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

**C. CAMPBELL, BEVERLY, JELINEK, MS.,**

Mailing Address 13040 LOBLOLLY LN S

City  
JACKSONVILLE

State  
FL

Zip Code  
32246-4171

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 ▼

645.00

Date of Receipt

MM / DD / YYYY  
06 / 20 / 2019

Transaction ID : SA11A.80524898

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

505.00