

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

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

FOR LINE NUMBER: PAGE 7711 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. DIAZ, PAMELA, , ,**

Mailing Address 497 DEFIANCE AVE

City  
ELYRIA

State  
OH

Zip Code  
44035-8226

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 ▼

243.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2019

**Transaction ID : SA11A.80521342**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. DIBENEDETTO, EVELYN, M., MRS.,**

Mailing Address 5534 HEATHER LANE

City  
OREFIELD

State  
PA

Zip Code  
18069-9038

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2019

**Transaction ID : SA11A.80525007**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. DICKEY, TOM, A., MR.,**

Mailing Address P.O. BOX 177

City  
EUSTIS

State  
ME

Zip Code  
04936-0177

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 ▼

457.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2019

**Transaction ID : SA11A.80429495**

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

190.00

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