

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

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

FOR LINE NUMBER: PAGE 10824 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. SYLVESTER, KATHLEEN, MARIE, MRS.,

Mailing Address 542 TUSCARORA DRIVE

City
SAN JOSE

State
CA

Zip Code
95123-4128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : SA11A.80590150

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. SYMONS, GLENNA, J., MRS.,

Mailing Address 1415 MARK TWAIN DRIVE

City
CENTRALIA

State
WA

Zip Code
98531-8893

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : SA11A.80578978

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. SZABO, MARIANNA, , ,

Mailing Address 9700 N WILLOW AVE

City
TAMPA

State
FL

Zip Code
33612-7762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MID FLORIDA PATHOLOGY

Occupation (for Individual)
PATHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

764.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : SA11A.80588909

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

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

290.00