

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

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

FOR LINE NUMBER: PAGE 2331 OF 79583

(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. LINE, MARIE, S., MRS.,**

Mailing Address 3026 54TH ST APT 318

City  
LUBBOCK

State  
TX

Zip Code  
79413-4238

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 ▼

307.50

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2019

Transaction ID : SA11A.83520244

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. LINGLE, LINDA, L., MS.,**

Mailing Address 724 MALLISON AVE

City  
AKRON

State  
OH

Zip Code  
44307-1824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN BUILDING MAIN

Occupation (for Individual)  
HOUSEKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.25

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2019

Transaction ID : SA11A.83608230

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. LINN, DANNY, , MR.,**

Mailing Address 1530 WILLOW CREEK CV

City  
CONWAY

State  
AR

Zip Code  
72034-7565

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 ▼

471.25

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2019

Transaction ID : SA11A.83519616

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

270.00