

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

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

FOR LINE NUMBER: PAGE 5465 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. ASTON, BRIAN, , ,

Mailing Address 460 WHITEHEAD RD

City
CHoudrant

State
LA

Zip Code
71227-3552

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FARMERVILLE DRUG

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2019

Transaction ID : SA11A.83498744

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. ATHANASIADIS, NAFSIKA, , ,

Mailing Address 511 BISHOP HOLLOW RD

City
NEWTOWN SQUARE

State
PA

Zip Code
19073-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2019

Transaction ID : SA11A.83616421

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. ATKINSON, CAROL, L., MS.,

Mailing Address 104 CRAFTSMAN

City
HEBER SPRINGS

State
AR

Zip Code
72543-6315

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 ▼

365.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2019

Transaction ID : SA11A.83630153

Amount of Each Receipt this Period

105.00

☐ Memo Item
CONTRIBUTION

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

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

190.00