

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

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

FOR LINE NUMBER: PAGE 5718 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. HUGH, GARY, D., MR.,**

Mailing Address 3601 E 118TH AVE

City  
DENVER

State  
CO

Zip Code  
80233-1605

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 ▼

306.25

Date of Receipt

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

Transaction ID : SA11A.83618381

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

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

**B. HUGHES, A., L., MR.,**

Mailing Address 5137 BROOKVIEW COURT

City

CARMICHAEL

State

CA

Zip Code

95608

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 ▼

280.00

Date of Receipt

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

Transaction ID : SA11A.83629648

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. HUGHES, ANDREW, , ,**

Mailing Address 2250 HARPER WOODS CT

City

MARIETTA

State

GA

Zip Code

30062-8604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOFT TOUCH MEDICAL

Occupation (for Individual)  
SOFT TOUCH MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11A.83499696

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

100.00