

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

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

FOR LINE NUMBER: PAGE 5935 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. RINEHART, RICHARD, , MR.,

Mailing Address 9215 ISLA BELLA CIR

City
BONITA SPRINGS

State
FL

Zip Code
34135-7225

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 ▼

255.00

Date of Receipt

11 / 05 / 2019

Transaction ID : **SA11A.83630154**

Amount of Each Receipt this Period

105.00

☐ Memo Item
 CONTRIBUTION

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

B. RIOS, PEDRO, R., MR.,

Mailing Address 1641 E EL NORTE PKWY

City
ESCONDIDO

State
CA

Zip Code
92027-1302

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
PRYOR

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

11 / 05 / 2019

Transaction ID : **SA11A.83628824**

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

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

C. RIPPEE, BRENDA, , MRS.,

Mailing Address 7370 ALT ST RT 49 E

City
ARCANUM

State
OH

Zip Code
45304-9675

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
PREMIER HEALTH

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.50

Date of Receipt

11 / 05 / 2019

Transaction ID : **SA11A.83499745**

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)..... ►

205.00