

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

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

FOR LINE NUMBER: PAGE 6009 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. STILES, STACY, , ,

Mailing Address 28673 COUNTY HIGHWAY G

City
TOMAH

State
WI

Zip Code
54660-8551

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA

Occupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

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

Transaction ID : SA11A.83499763

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. STOCKWELL, DIANE, L., MRS.,

Mailing Address 7325 E. EVANS RD

City

SCOTTSDALE

State

AZ

Zip Code

85260-3101

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 ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.83612589

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. STOCK, JONATHAN, , MR.,

Mailing Address 5130 AUGUSTA DRIVE

City

WESTERVILLE

State

OH

Zip Code

43082-8875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VORYS, SATER, SEYMOUR & PEASE

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

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

Transaction ID : SA11A.83611655

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).....▶

405.00