

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

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

FOR LINE NUMBER: PAGE 6210 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. GEISER, ELLIS, , MR.,**

Mailing Address 11760 ARNOLD ROAD

City  
ORRVILLE

State  
OH

Zip Code  
44667

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRAL RENT ALL

Occupation (for Individual)  
MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 06 / 2019

Transaction ID : SA11A.83630833

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. GERMANN, KEITH, H., MR.,**

Mailing Address 615 N WORTHY DRIVE

City  
GLENDDORA

State  
CA

Zip Code  
91741-2975

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 ▼

450.50

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 06 / 2019

Transaction ID : SA11A.83620057

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

**C. GESELL, PAMELLA, BROWN, ,**

Mailing Address 332 MYSTICAL WAY

City  
SAINT AUGUSTINE

State  
FL

Zip Code  
32080-6444

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
TILE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 06 / 2019

Transaction ID : SA11A.83643100

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

295.00