

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7856 OF 79583

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. YOUNGBERG, KATHY, SUE, MS.,

Mailing Address 17211 N. CALICO DRIVE

 City
 SUN CITY

 State
 AZ

 Zip Code
 85373-2202

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 HOMEMAKER

 Occupation (for Individual)
 HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2019

Transaction ID : SA11A.83683701

Amount of Each Receipt this Period

101.00

☐ Memo Item
 CONTRIBUTION

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

B. YOUNG, STEPHANIE, , ,

Mailing Address 8217 TAOS PASEO AVE

 City
 LAS VEGAS

 State
 NV

 Zip Code
 89128-8203

 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 ▼

550.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2019

Transaction ID : SA11A.83621232

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

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

C. ZDAN, HENRY, , MR.,

Mailing Address 7016 HARVEST DR

 City
 PAPILLION

 State
 NE

 Zip Code
 68133-2129

 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 BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2019

Transaction ID : SA11A.83679269

Amount of Each Receipt this Period

150.00

☐ Memo Item
 CONTRIBUTION

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

301.00

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