

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

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

FOR LINE NUMBER: PAGE 11056 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. HUGHES, CHARLES, R., MR.,

Mailing Address 1625 E. 72ND STREET
 SUITE 700-224

City
 TACOMA

State
 WA

Zip Code
 98404-5455

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 ▼

1621.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 13 / 2019

Transaction ID : SA11A.83700791

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

B. HUGHES, JOAN, , ,

Mailing Address 4764 GARDEN STREET

City

PHILADELPHIA

State

PA

Zip Code

19137-2224

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 ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 13 / 2019

Transaction ID : SA11A.83702281

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

C. HUHNKE, MICHAEL, ANDREW, MR.,

Mailing Address P.O. BOX 56006

City

HOUSTON

State

TX

Zip Code

77256

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 13 / 2019

Transaction ID : SA11A.83736233

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)..... ►

370.00