

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

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

FOR LINE NUMBER: PAGE 12848 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. CURLEE, RENA, K., MRS.,**

Mailing Address 840 DORGENE LN

City  
CINCINNATI

State  
OH

Zip Code  
45244-5030

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 ▼

675.00

Date of Receipt

11 / 18 / 2019

Transaction ID : SA11A.83790027

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. CURRY, KEITH, , ,**

Mailing Address 10633 WOODMONT LANE

City  
FISHERS

State  
IN

Zip Code  
46037-8959

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 ▼

216.30

Date of Receipt

11 / 18 / 2019

Transaction ID : SA11A.83775521

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

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

**C. CURTIN, FRANCIS, G., DR.,**

Mailing Address 5325 BUCKHEAD TRL

City  
KNOXVILLE

State  
TN

Zip Code  
37919-8986

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABERCROMBIE RADIOLOGY CONSULTANTS INC.

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

487.50

Date of Receipt

11 / 18 / 2019

Transaction ID : SA11A.83788211

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

295.00