

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15933 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. CHILDERS, JAMES, R., ,

Mailing Address 326 FOREST RIDGE STREET

 City
 HENDERSON

 State
 NV

 Zip Code
 89014-7830

 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 ▼

500.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2019

Transaction ID : SA11A.83819229

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

B. CHILDRESS, ROSE, , MISS,

Mailing Address 6645 OLIVE BRANCH RD

 City
 OREGONIA

 State
 OH

 Zip Code
 45054-9716

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 LOGICALIS

 Occupation (for Individual)
 SERVICE DELIVERY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2019

Transaction ID : SA11A.83822710

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

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

C. CHILDRESS, WILLIAM, , ,

Mailing Address 1912 NICOLE ST

 City
 PENSACOLA

 State
 FL

 Zip Code
 32507-1590

 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 ▼

636.75

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2019

Transaction ID : SA11A.83822293

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

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

160.00