

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

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

FOR LINE NUMBER: PAGE 21891 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. SUDWEEKS, IRVA, , MS.,

Mailing Address 219 NORTH CENTER STREET

City
KINGSTON

State
UT

Zip Code
84743-7711

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 BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11A.83886457

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. SUEDKAMP, CHERYL, J., MS.,

Mailing Address 4315 PORTLAND LAKE DR.

City
FLORISSANT

State
MO

Zip Code
63034-3448

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 ▼

343.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11A.83887024

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. SULLIVAN, DENNIS, PATRICK, MR.,

Mailing Address 408 HUCKLEBERRY TRL

City
SAINT JOHNS

State
FL

Zip Code
32259-4455

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11A.83888627

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

85.00