

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

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

FOR LINE NUMBER: PAGE 25739 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. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8907172.21

Date of Receipt

11 / 27 / 2019

Transaction ID : SA11C.83974986220214

Amount of Each Receipt this Period

45.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

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

B. TESTANI, JOSEPH, , MR.,

Mailing Address 90 BAY ST LANDING APT 81

City
STATEN ISLAND

State
NY

Zip Code
10301-2664

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
DOWNSTATE MED CENTER

Occupation (for Individual)
HEALTH CARE ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

11 / 27 / 2019

Transaction ID : SA11A.83985183

Amount of Each Receipt this Period

45.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

8907172.21

Date of Receipt

11 / 27 / 2019

Transaction ID : SA11C.83974986220216

Amount of Each Receipt this Period

10.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

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

45.00

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