

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 OF 3672

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. KITTS, DAVID, , DR.,

Mailing Address 1605 MADEIRA CIRCLE

City
PETALUMAState
CAZip Code
94954-7425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.71538632

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. KNIPPA, CHERIE, , ,

Mailing Address 872 LASSO LOOP

City
CANYON LAKEState
TXZip Code
78133-2055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
R C E INCOccupation (for Individual)
ADMIN ASST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.71540976

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. KNOX, DORIS, M., MS.,

Mailing Address 23144 S. SHORE DRIVE

City
EDWARDSBURGState
MIZip Code
49112-8502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.71534801

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

350.00