

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

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

FOR LINE NUMBER: PAGE 7 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Majority Fund**

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

**A. LAMPTON, MASON, , MR.,**

Mailing Address P.O. BOX 1360

City  
COLUMBUS

State  
GA

Zip Code  
31902-1360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STANDARD CONCRETE PRODUCTS

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

Transaction ID : SA11A.120902

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHOATE, ARTHUR, , MR.,**

Mailing Address 1390 S. DIXIE HWY STE 2221

City  
CORAL GABLES

State  
FL

Zip Code  
33146-2946

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2018

Transaction ID : SA11A.120990

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. HUNTZICKER, PATRICIA, , MS.,**

Mailing Address 5170 NW KAISER RD

City  
PORTLAND

State  
OR

Zip Code  
97229-2253

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 / D D / Y Y Y Y Y Y  
06 / 11 / 2018

Transaction ID : SA11A.120995

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1750.00