

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 165

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Republican Party of Minnesota - Federal**

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

**A. Smith, Lowery, , ,**

Mailing Address 2868 W River Parkway

City  
Minneapolis

State  
MN

Zip Code  
55406-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016

**Transaction ID : 62495-995875-c**

Amount of Each Receipt this Period

1000

☐ Memo Item

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

**B. Sundermeyer, Leroy, , ,**

Mailing Address 3804 Ewing Avenue S

City  
Minneapolis

State  
MN

Zip Code  
55410-1050

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Advertising Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 17 / 2016

**Transaction ID : 186284-996913-c**

Amount of Each Receipt this Period

30

☐ Memo Item

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

**C. Swanson, Barbara L., , ,**

Mailing Address 7724 York Lane N

City  
Brooklyn Park

State  
MN

Zip Code  
55443-2891

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 ▼

280

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2016

**Transaction ID : 52742-996657-c**

Amount of Each Receipt this Period

115

☐ Memo Item

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

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

1145.00