

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)

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

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. KELLER, ARLEENE, , ,

Mailing Address 8369 LYNNEHAVEN DR.

City
CINCINNATI

State
OH

Zip Code
45236-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUBURBAN NURSING HOMES

Occupation (for Individual)
ADMINISTRATOR

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
04 / 13 / 2020

Transaction ID : SA11A.1735206

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. KIKO, JAMES, R., MR.,

Mailing Address 811 FOX AVE. SE

City
PARIS

State
OH

Zip Code
44669-9793

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2020

Transaction ID : SA11A.1735419

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. KINNEY, VIRGINIA, , ,

Mailing Address 8055 STATE RT. 718

City
PLEASANT HILL

State
OH

Zip Code
45359-1501

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2020

Transaction ID : SA11A.1735591

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

650.00