

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 13 OF 289
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Michigan Republican Party

A. Frederick, Robert, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7161 Hidden Valley Dr

City Lambertville	State MI	Zip Code 48144-9452
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Promedia Region North	Occupation (for Individual) Physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2019

Transaction ID : A264B0F980F834D6B8C5

Amount of Each Receipt this Period
250.00

Memo Item

B. Hayden, Agnes, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 929 Peninsula Dr

City Traverse City	State MI	Zip Code 49686-2743
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2019

Transaction ID : AF08844B0E2324F18A13

Amount of Each Receipt this Period
500.00

Memo Item

C. Jandernoa, Michael, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 Monroe Ave NW
Ste 410

City Grand Rapids	State MI	Zip Code 49503-2634
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) 42 North Partners	Occupation (for Individual) Executive
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2019

Transaction ID : AC6BF8142AE0C4AB1878

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10750.00
TOTAL This Period (last page this line number only).....	