

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

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

FOR LINE NUMBER: PAGE 8332 OF 20203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. CALIFANO, CARMEN, CARL, MR.,

Mailing Address 3132 EAST 3350 NORTH

City
LIBERTY

State
UT

Zip Code
84310-9712

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
03 / 17 / 2020

Transaction ID : SA11A.87231688

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. CAMILLO, JOHN, E., MR., SR.

Mailing Address 314 BOSTON AVE

City

EGG HARBOR CITY

State

NJ

Zip Code

08215-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : SA11A.87227206

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

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

C. CAMPBELL, BEVERLY, J., MS.,

Mailing Address 13040 LOBLOLLY LANE SOUTH

City

JACKSONVILLE

State

FL

Zip Code

32246-4171

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 ▼

1109.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : SA11A.87231115

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

195.00

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