

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9198 OF 20203

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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 NATIONAL COMMITTEE

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

A. WEAVER, JUDITH, K., MS.,

Mailing Address 1135 LANEDALE ST NW

City
MASSILLONState
OHZip Code
44647-8605FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2020

Transaction ID : SA11A.87261678

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. WEEKS, ROBERT, F., MR.,

Mailing Address 705 KIRKWOOD CIR

City
WOODSTOCKState
GAZip Code
30189-8155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2020

Transaction ID : SA11A.87261425

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. WEISBART, RICHARD, D., MR.,

Mailing Address 3515 COCHISE LANE

City
LAS VEGASState
NVZip Code
89169FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2020

Transaction ID : SA11A.87256626

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

200.00

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