

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

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

FOR LINE NUMBER: PAGE 10372 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. CUTLER, ROBERT, , MR.,**

Mailing Address 10955 GRANADA LANE  
STE 200-100

City  
OVERLAND PARK

State  
KS

Zip Code  
66211-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
C3

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2020

Transaction ID : SA11A.87355340

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. D'AMBROSIO, MARK, JOSEPH, MR.,**

Mailing Address 3806 26TH ST N

City  
ARLINGTON

State  
VA

Zip Code  
22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2020

Transaction ID : SA11A.87348984

Amount of Each Receipt this Period

76.00

☐ Memo Item  
CONTRIBUTION

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

**C. DALTON, KAREN, J., MS.,**

Mailing Address 229 W GOETHE ST

City  
CHICAGO

State  
IL

Zip Code  
60610-1809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 23 / 2020

Transaction ID : SA11A.87348961

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

476.00