

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

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

FOR LINE NUMBER: PAGE 13111 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. LEFAY, MARIA, , ,**

Mailing Address 11924 FOREST HILL BOULEVARD STE 10

City  
WELLINGTON

State  
FL

Zip Code  
33414-6256

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2020

Transaction ID : SA11A.87520575

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10196580.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2020

Transaction ID : SA11C.87516554329719

Amount of Each Receipt this Period

15.00

☒ Memo Item  
CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED

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

**C. SZABO, MARIANNA, , MS.,**

Mailing Address 9700 N. WILLOW AVE

City  
TAMPA

State  
FL

Zip Code  
33612-7762

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MID-FLORIDA PATHOLOGY

Occupation (for Individual)  
PATHOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2020

Transaction ID : SA11A.87520577

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

65.00