

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

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

FOR LINE NUMBER: PAGE 3778 OF 27201

(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. MCLAUGHLIN, ROBERT, F., MR.,**

Mailing Address 5665 ARAPAHO ROAD  
APT 3321

City  
DALLAS

State  
TX

Zip Code  
75248-7018

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 ▼

885.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2019

Transaction ID : SA11A.80782662

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. MCMAHON, MARY, M., MRS.,**

Mailing Address 4701 SOULE PLACE

City  
GULF BREEZE

State  
FL

Zip Code  
32563-9271

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 ▼

326.25

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2019

Transaction ID : SA11A.80783723

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. MCMAHON, TIM, , MR.,**

Mailing Address P.O. BOX 8097

City  
FAYETTEVILLE

State  
AR

Zip Code  
72703-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TMBCI

Occupation (for Individual)  
BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2019

Transaction ID : SA11A.80778068

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

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

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

130.00