

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

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

FOR LINE NUMBER: PAGE 3791 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. MEYER, AUBREY, L., MR.,**

Mailing Address 11718 MOHR ROAD

City  
KINGSVILLE

State  
MD

Zip Code  
21087-1321

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 ▼

435.00

Date of Receipt

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

Transaction ID : SA11A.80770548

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. MEYER, HELENE, , MS.,**

Mailing Address 1475 AZNOE RD

City  
WASHINGTON ISLAND

State  
WI

Zip Code  
54246-9173

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 ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.80776802

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. MEYER, MARK, J., MR.,**

Mailing Address 2002 COLINA CT

City  
ATLANTIC BEACH

State  
FL

Zip Code  
32233-4530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLACK KNIGHT INC

Occupation (for Individual)  
APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

783.75

Date of Receipt

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

Transaction ID : SA11A.80784192

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

250.00