

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

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

FOR LINE NUMBER: PAGE 3926 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. PHILLIPS, JEFF, , ,**

Mailing Address 69 BAYVIEW AVENUE

City  
GREAT NECK

State  
NY

Zip Code  
11021-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALCONOX

Occupation (for Individual)  
SR. DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.50

Date of Receipt

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

**Transaction ID : SA11A.80780159**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

**B. PHILLIPS, JEFF, , ,**

Mailing Address 69 BAYVIEW AVENUE

City  
GREAT NECK

State  
NY

Zip Code  
11021-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALCONOX

Occupation (for Individual)  
SR. DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.50

Date of Receipt

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

**Transaction ID : SA11A.80783787**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. PHILLIPS, LARRY, , MR.,**

Mailing Address 14498 ROAD T

City  
KISMET

State  
KS

Zip Code  
67859-5999

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 ▼

205.00

Date of Receipt

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

**Transaction ID : SA11A.80784724**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

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

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

85.00