

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

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

FOR LINE NUMBER: PAGE 5778 OF 27201

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REPUBLICAN NATIONAL COMMITTEE**

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

**A. FLORENCE, DAVID, , MR.,**

Mailing Address 11900 FAWN TRL SE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87123-3544

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2019

**Transaction ID : SA11A.80851008**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. FLORENCE, GERALD, , ,**

Mailing Address 1307 E 52ND ST

City  
TACOMA

State  
WA

Zip Code  
98404-2712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SKILLS INC

Occupation (for Individual)  
RACKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2019

**Transaction ID : SA11A.80853337**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

**C. FLOYD, JEFFREY, , MR.,**

Mailing Address 2250 SUNSET CIR

City  
FORT MILL

State  
SC

Zip Code  
29715-7712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LS3P

Occupation (for Individual)  
ARCHITECT

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 / 11 / 2019

**Transaction ID : SA11A.80851084**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

360.00