

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. PARKER, DANIEL, M., MR.,**

Mailing Address 4021 CLUBVIEW COURT

City  
ROCKLIN

State  
CA

Zip Code  
95765-5704

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 ▼

997.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 12 / 2019

Transaction ID : SA11A.80855526

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. PARKER, PHILLIP, J., MR.,**

Mailing Address 312 CLAY ST

City  
GOODWATER

State  
AL

Zip Code  
35072-6542

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 12 / 2019

Transaction ID : SA11A.80883735

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

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

**C. PARKER, ROBERT, , ,**

Mailing Address 615 SAN JACINTO STREET

City  
HIGHLANDS

State  
TX

Zip Code  
77562-3652

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRI-NATIONAL INC

Occupation (for Individual)  
OTR DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 12 / 2019

Transaction ID : SA11A.80855120

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

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

405.00