

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8094 OF 27201

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. PURDY, ALBERT, M., ,**

Mailing Address 104 MOCKINGBIRD DRIVE

City  
KINGSTONState  
PAZip Code  
18704-1639FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.50

Date of Receipt

M M	D D	Y Y Y Y
07	17	2019

**Transaction ID : SA11A.80946523**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. PUTHOFF, CURTIS, R., MR.,**

Mailing Address 13021 RIVER BLUFF CT

City  
FORT MYERSState  
FLZip Code  
33905-3853FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.75

Date of Receipt

M M	D D	Y Y Y Y
07	17	2019

**Transaction ID : SA11A.80934009**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. PUTRA, MOCHAMAD, , ,**

Mailing Address 2481 JONES LN

City  
SILVER SPRINGState  
MDZip Code  
20902-1889FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SATAY SARINAHOccupation (for Individual)  
DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1010.50

Date of Receipt

M M	D D	Y Y Y Y
07	17	2019

**Transaction ID : SA11A.80947485**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

135.00

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