

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

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

FOR LINE NUMBER: PAGE 9650 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. HUGGER, JANICE, , ,

Mailing Address 3357 DEWBERRY RD

City  
ACWORTH

State  
GA

Zip Code  
30101-4004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ACI INC

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2019

Transaction ID : SA11A.81064746

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

B. HUNDLEY, SHANNON, , MS.,

Mailing Address 8311 BIG RUN ROAD

City  
GAMBIER

State  
OH

Zip Code  
43022-9715

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

COLDWELL BANKER

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2019

Transaction ID : SA11A.81064748

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

C. HUNTER, DURON, LYNN, MR., JR.

Mailing Address P.O. BOX 35

City  
FAIRVIEW

State  
UT

Zip Code  
84629-0035

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2019

Transaction ID : SA11A.81054871

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

120.00

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