

# **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. JOHNSON, LOWELL, S., MR.,**

Mailing Address 10403 JOLIET AVE

City  
LUBBOCK

State  
TX

Zip Code  
79423-5172

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 ▼

250.00

Date of Receipt

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

**Transaction ID : SA11A.81036643**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. JOHNSON, NICK, , ,**

Mailing Address 556 W 37TH ST  
APT 3F

City  
CHICAGO

State  
IL

Zip Code  
60609-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NICK JOHNSON

Occupation (for Individual)  
ELEVATOR CONSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

**Transaction ID : SA11A.81064759**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. JOHNSON, PHIL, L., MR.,**

Mailing Address 17397 NORTH SHORE ESTATES ROAD

City  
SPRING LAKE

State  
MI

Zip Code  
49456-9110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAPROSHIELD

Occupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6850.00

Date of Receipt

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

**Transaction ID : SA11A.81065540**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

385.00