

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10047 OF 27201

(check only one)

<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. ELLIS, KATRINA, E., MRS.,**

Mailing Address P.O. BOX 110

City  
FOX ISLANDState  
WAZip Code  
98333-0110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENINSULA SCHOOL DISTRICTOccupation (for Individual)  
EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2019

**Transaction ID : SA11A.81065888**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
 CONTRIBUTION

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

**B. ELLSWORTH, JOANN, , ,**

Mailing Address 49283 ALPINE AVE N

City  
STANCHFIELDState  
MNZip Code  
55080-5211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDTRONICOccupation (for Individual)  
PROG MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2019

**Transaction ID : SA11A.81067543**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

**C. ELSE, ERIC, , MR.,**

Mailing Address 1545 NOTTINGHAM DR.

City  
MANKATOState  
MNZip Code  
56003-2813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2019

**Transaction ID : SA11A.81067280**

Amount of Each Receipt this Period

42.00

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

147.00

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