

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

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

FOR LINE NUMBER: PAGE 11015 OF 27201

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. MILLER, MICHELLE, D., ,

Mailing Address 247 VILLA VERDA RD

City
SAINT AUGUSTINE

State
FL

Zip Code
32080-7666

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11A.81135660

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. MILLER, ROY, , ,

Mailing Address 811 E EMERSON AVE

City
ORANGE

State
CA

Zip Code
92865-3419

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROY MILLER PAINTING INC.

Occupation (for Individual)
PAINTING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11A.81135661

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. MILLER, SHERRI, , MS.,

Mailing Address 118 REBECCA DRIVE

City
WINCHESTER

State
VA

Zip Code
22602-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATIONAL PARK SERVICE

Occupation (for Individual)
CONTRACT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11A.81119309

Amount of Each Receipt this Period

750.00

☐ Memo Item
CONTRIBUTION

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

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

820.00