

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

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

FOR LINE NUMBER: PAGE 11942 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. TUDOR, MICHAEL, J., MR.,

Mailing Address 1900 CORAL GATE DRIVE

City
CORAL GABLES

State
FL

Zip Code
33145-2228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ESQUIRE LOGISTICS, INC

Occupation (for Individual)
V.P. OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2019

Transaction ID : SA11A.81177631

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. TULLIS, DAVID, H., DR.,

Mailing Address 4186 PRESTON PKWY W

City
PERRYSBURG

State
OH

Zip Code
43551

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOLEDO CLINIC INC.

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 29 / 2019

Transaction ID : SA11A.81180559

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. TULLOCH, ROGER, ANTHONY, MR.,

Mailing Address P.O. BOX 384

City
EAST LIVERPOOL

State
OH

Zip Code
43920-5384

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 / 29 / 2019

Transaction ID : SA11A.81154039

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

225.00