

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. HANNA, GEORGE, , ,

Mailing Address 7710 WATER FALL TRL.

City

CHAGRIN FALLS

State

OH

Zip Code

44022-3962

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ENGINEER

Occupation (for Individual)

GRAPHITE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

 M = M / D = D / Y = Y - Y - Y
 11 / 22 / 2019

Transaction ID : SA11A.1730052

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

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

B. HAUSER, SALLY, , ,

Mailing Address 2383 SWANSEA ROAD

City

COLUMBUS

State

Zip Code

43221-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AUDITOR OF STATE - OHIOOccupation (for Individual)
ADMINISTRATIVE STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M = M / D = D / Y = Y - Y - Y
 11 / 21 / 2019

Transaction ID : SA11A.1729889

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

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

C. HEATHER, TIMOTHY, P., MR.,

Mailing Address 4412 HUBBLE RD.

City

CINCINNATI

State

OH

Zip Code

45247-6020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M = M / D = D / Y = Y - Y - Y
 11 / 22 / 2019

Transaction ID : SA11A.1730176

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

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

950.00

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