

# **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. COLLINS, GEORGE, C., MR.,**

Mailing Address 728 MONTVUE AVE

City  
KINGSTON

State  
TN

Zip Code  
37763-3511

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 ▼

553.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

**Transaction ID : SA11A.87933190**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. COLLINS, HENRY, H., MR., JR.**

Mailing Address 4007 SAINT CHARLES AVE APT 317

City  
NEW ORLEANS

State  
LA

Zip Code  
70115-4774

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 ▼

212.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

**Transaction ID : SA11A.87967665**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
CONTRIBUTION

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

**C. COLLINS, PAUL, E., MR.,**

Mailing Address 794 LA PAZ CT

City  
MESQUITE

State  
NV

Zip Code  
89027-7616

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

**Transaction ID : SA11A.87934637**

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

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

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

285.00