

# **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)

PAGE 9265 OF 61111

☒ 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. FLESHER, PATRICIA, G., MRS.,**

Mailing Address 12350 BASS LAKE RD

City  
CHARDON

State  
OH

Zip Code  
44024-8336

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MR. EXIVAITER

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

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

Transaction ID : SA11A.87940781

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. FLORES, WAYNE, , MR.,**

Mailing Address 5525 LANCER AVE

City  
SANTA MARIA

State  
CA

Zip Code  
93455-4914

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 ▼

230.00

Date of Receipt

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

Transaction ID : SA11A.87967859

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. FLOYD, RONNIE, D., C M SGT, USAF (RET.**

Mailing Address 15314 SPRING FALLS

City  
SAN ANTONIO

State  
TX

Zip Code  
78247-5407

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 ▼

418.50

Date of Receipt

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

Transaction ID : SA11A.87934064

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

175.00

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