

# **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. TUCKER, HERBERT, W., MR.,**

Mailing Address 305 N MAIN ST

City  
CONTINENTAL

State  
OH

Zip Code  
45831-8107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNEMPLOYED

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

**Transaction ID : SA11A.88214683**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. TUENMLER, PAUL, K., MR.,**

Mailing Address P.O. BOX 4086

City  
SCOTTSDALE

State  
AZ

Zip Code  
85261-4086

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES SCHWAB

Occupation (for Individual)  
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

**Transaction ID : SA11A.88206055**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. TULL, GERALD, , ,**

Mailing Address 35 BONITA CT

City  
RANCHO MIRAGE

State  
CA

Zip Code  
92270-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RANCHO MIRAGE ANESTHESIA CONSULTANTS

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

**Transaction ID : SA11A.88256854**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

400.00