

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

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

FOR LINE NUMBER: PAGE 17550 OF 61111

(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. HASHMAN, RAY, , ,**

Mailing Address P.O. BOX 49517

City  
LOS ANGELES

State  
CA

Zip Code  
90049-0517

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11A.88476677

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. HASKIN, TERRY, F., DR.,**

Mailing Address 256 GREEN VALLEY RD

City  
FREEDOM

State  
CA

Zip Code  
95019-3139

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 ▼

827.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11A.88477525

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. HATATHLI, JONATHAN, , ,**

Mailing Address ARIZONA PARK ESTATES  
LOT 153

City  
SANDERS

State  
AZ

Zip Code  
86512

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11A.88477503

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)..... ►

235.00