

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

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

FOR LINE NUMBER: PAGE 17820 OF 61111

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REPUBLICAN NATIONAL COMMITTEE**

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

**A. TRACY, ADAM, , ,**

Mailing Address 1511 PINEY DRIVE

City  
BIG PINEY

State  
WY

Zip Code  
83113-5229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAPPY ENDINGS

Occupation (for Individual)  
SHELTER WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.78

Date of Receipt

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

Transaction ID : SA11A.88476695

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**B. TRAINER, CLARA, E., MS.,**

Mailing Address 989 SPRUCE AVE  
P.O. BOX 112

City  
CORVALLIS

State  
OR

Zip Code  
97330

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 ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.88365129

Amount of Each Receipt this Period

140.00

☐ Memo Item  
CONTRIBUTION

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

**C. TRAN, NI, SINH, ,**

Mailing Address 2308 DIAMOND OAKS DR

City  
GARLAND

State  
TX

Zip Code  
75044-7314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNERSTONE BUILDING BRANDS

Occupation (for Individual)  
NETWORK ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.88379954

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

425.00