

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18939 OF 61111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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. FELTON, JOHN, BLAKE, MR.,

Mailing Address 18 BETONY PL

City
THE WOODLANDSState
TXZip Code
77382-4405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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	/	23	/	2020

Transaction ID : SA11A.88482387

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. FENG, BAO, QI, ,

Mailing Address 730 3RD ST NE

City
NEW PHILAState
OHZip Code
44663-2742FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENT STATE UNIERSITY OF TUSCARAWAS CAM

Occupation (for Individual)

ASSOCIATED PROFESSOR IN MATH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.75

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	23	/	2020

Transaction ID : SA11A.88488572

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

C. FERGUSON, ZONELLE, N., ,

Mailing Address P.O. BOX 34

City
MURCHISONState
TXZip Code
75778-0034FEC 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 ▼

315.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	23	/	2020

Transaction ID : SA11A.88461826

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

390.00

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