

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

FOR LINE NUMBER: PAGE 19574 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. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13989150.71

Date of Receipt

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

**Transaction ID : SA11C.88368776273001**

Amount of Each Receipt this Period

50.00

☒ Memo Item  
 CONTRIBUTION
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED

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

**B. BROLYER, EDWIN, D., MR.,**

Mailing Address 2483 WILDHORSE TR

City  
CHEYENNEState  
WYZip Code  
82009-2232FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
UBSOccupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

**Transaction ID : SA11A.88370994**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

**C. WINRED**

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

13989150.71

Date of Receipt

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

**Transaction ID : SA11C.88368776273004**

Amount of Each Receipt this Period

50.00

☒ Memo Item  
 CONTRIBUTION
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

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