

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

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

FOR LINE NUMBER: PAGE 20017 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. REPPUCCI, LINDA, , MRS.,

Mailing Address 17 SHADY OAK LANR

City
NATICK

State
MA

Zip Code
01760

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOSTON MEDICAL CENTER

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11A.88373329

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

B. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC 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 Y Y
04 / 23 / 2020

Transaction ID : SA11C.88368776275141

Amount of Each Receipt this Period

100.00

☒ Memo Item
CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

C. SMITH, LINDA, L., MRS.,

Mailing Address 18649 BRUSHY FORK RD SE

City
NEWARK

State
OH

Zip Code
43056-9485

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 ▼

1170.00

Date of Receipt

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

Transaction ID : SA11A.88373333

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

120.00