

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

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

FOR LINE NUMBER: PAGE 22540 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. WHITE, DEBORAH, , ,

Mailing Address 5293 LAYHIGH RD

City
HAMILTON

State
OH

Zip Code
45013-9265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
COMMERCIAL CLEANING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2020

Transaction ID : SA11A.88521770

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. WHITE, DENNIS, , ,

Mailing Address 2865 LENOX RD NE
APT 607

City
ATLANTA

State
GA

Zip Code
30324-2887

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIANT HEALTH SOLUTIONS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2020

Transaction ID : SA11A.88556542

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. WHITE, LINDA, L., MS.,

Mailing Address 1518 67TH STREET W.

City
BRADENTON

State
FL

Zip Code
34209-4567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2020

Transaction ID : SA11A.88522514

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

175.00

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