

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

FOR LINE NUMBER: PAGE 1208 OF 2229

(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. DACHNIWSKYJ, ROKSOLIANA, , MRS.,**

Mailing Address 5714 W PENSACOLA AVE

City  
CHICAGOState  
ILZip Code  
60634-1721FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	22	/	2017

Transaction ID : SA11A.71146685

Amount of Each Receipt this Period

55.00

☐ Memo Item  
CONTRIBUTION

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

**B. DEER, DANIEL, , MR.,**

Mailing Address 3920 N. OCEAN DR. #20A

City  
RIVIERA BEACHState  
FLZip Code  
33404-2813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
A.K.J. INDUST.Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	22	/	2017

Transaction ID : SA11A.71145531

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. DELANEY, DAVID, , MR.,**

Mailing Address 737 N SHERIDAN RD

City  
LAKE FORESTState  
ILZip Code  
60045-2244FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAINE PARTNERSOccupation (for Individual)  
STRATEGIC ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	22	/	2017

Transaction ID : SA11A.71144476

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

655.00