

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

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

FOR LINE NUMBER: PAGE 679 OF 8575

(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. **LESHER, STEPHEN, , ,**

Mailing Address 1524 WINSFORD LN

City
YORK

State
PA

Zip Code
17404-9080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCDONALDS

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2019

Transaction ID : SA11A.79703653

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. **LEVY, WILLIAM, M., MR.,**

Mailing Address 105 LAPAIX LANE

City
TOWSON

State
MD

Zip Code
21204-7506

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2019

Transaction ID : SA11A.79627120

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. **LEWIS, BOBBY, , MR.,**

Mailing Address 5316 SANTA TERESA DR.

City
EL PASO

State
TX

Zip Code
79932-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF VETERANS AFFAIRS

Occupation (for Individual)
SOCIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2019

Transaction ID : SA11A.79703662

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

175.00

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