

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

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

FOR LINE NUMBER: PAGE 4284 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. CODISPOTI, FLORENCE, S., MS.,**

Mailing Address 115 SYLVIA STREET

City  
STATEN ISLAND

State  
NY

Zip Code  
10312-3724

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 ▼

458.75

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 20 / 2019

Transaction ID : SA11A.79861677

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. COHEN, WILBUR, , MR.,**

Mailing Address 84 CARPENTERS RIDGE

City  
CINCINNATI

State  
OH

Zip Code  
45241-3244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COHEN BROTHERS, INC.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 20 / 2019

Transaction ID : SA11A.79857553

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. COLE, JESSICA, ELIZABETH, MS.,**

Mailing Address 780 GROUSE DR.

City  
SPRING CREEK

State  
NV

Zip Code  
89815-7018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RALEYS

Occupation (for Individual)  
PHARM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.25

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 20 / 2019

Transaction ID : SA11A.79889930

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

185.00