

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

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

FOR LINE NUMBER: PAGE 4062 OF 9224

(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. BURRIS, YADA, , MRS.,

Mailing Address 8608 SW 19TH RD

City
GAINESVILLE

State
FL

Zip Code
32607-3489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IF HEALTH

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2019

Transaction ID : SA11A.79032836

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. BURROWS, KELLY, , MS.,

Mailing Address P.O. BOX 328

City
GLENDO

State
WY

Zip Code
82213-0328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2019

Transaction ID : SA11A.79032837

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. BURROWS, KELLY, , MS.,

Mailing Address P.O. BOX 328

City
GLENDO

State
WY

Zip Code
82213-0328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2019

Transaction ID : SA11A.79032838

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)..... ►

120.00