

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

FOR LINE NUMBER: PAGE 1016 / 5032

(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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE**A.**Full Name (Last, First, Middle Initial)
Mr. Frank Duniewski

Mailing Address P.O. Box 2164

City	State	Zip Code
Brooklyn	NY	11202

FEC ID number of contributing
federal political committee.

C

Name of Employer
RequestedOccupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	7

Transaction ID: 47492277

Amount of Each Receipt this Period

1000.00

B.Full Name (Last, First, Middle Initial)
Mr. Allen G. DunkenMailing Address 1301 N. Highlands Parkway
Apartment 230

City	State	Zip Code
Tacoma	WA	98406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: 47473700

Amount of Each Receipt this Period

25.00

C.Full Name (Last, First, Middle Initial)
Lisa Dunkle

Mailing Address 12 Richborough Road

City	State	Zip Code
Madison	CT	06443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schering Plough Corporati-
onOccupation
Physician Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	7

Transaction ID: 47511141

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

1135.00

TOTAL This Period (last page this line number only)