

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1041 OF 10613

☒ 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. STONE, MARLENE, , ,**

Mailing Address 407336 E. 1210 RD

City  
EUFAULA

State  
OK

Zip Code  
74432-5670

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017

**Transaction ID : SA11A.73228458**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. STONE, SUSAN, S., MRS.,**

Mailing Address 390 RIVER HILL ROAD

City  
CORNELIA

State  
GA

Zip Code  
30531-5902

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017

**Transaction ID : SA11A.73228790**

Amount of Each Receipt this Period

110.00

☐ Memo Item  
CONTRIBUTION

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

**C. STONE, TOM, EUGENE, ,**

Mailing Address 355 BEAVER RIDGE RD

City  
COLLINSVILLE

State  
VA

Zip Code  
24078-3073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MORRISETTE PAPER CO

Occupation (for Individual)  
SALES REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017

**Transaction ID : SA11A.73219728**

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)..... ►

195.00