

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

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

FOR LINE NUMBER: PAGE 5882 OF 10613

(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. SHY, STEPHEN, , DR.,

Mailing Address 3170 RT 75

City
HUNTINGTON

State
WV

Zip Code
25704-9150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

OVP

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2017

Transaction ID : SA11A.73296288

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. SIDLAK, MICHAEL, , ,

Mailing Address 1254 PEBBLEBROOKE LANE
APT 207

City

CHARLOTTESVILLE

State

VA

Zip Code

22902-7176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UNIVERSITY OF VIRGINIA HEALTH SYSTEM

Occupation (for Individual)

CLINICAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2017

Transaction ID : SA11A.73307439

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

C. SIEPIERSKI, GINA, , ,

Mailing Address 15246 HILLCREST CT

City

LIVONIA

State

MI

Zip Code

48154-3656

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 ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2017

Transaction ID : SA11A.73301010

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00