

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

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

FOR LINE NUMBER: PAGE 384 OF 27511

(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. FELPS, LEON, , DR.,

Mailing Address 222 TURTLE TRACK LN

City
JEKYLL ISLAND

State
GA

Zip Code
31527-1074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MORRISON DENTAL ASSOCIATES

Occupation (for Individual)
ORAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2019

Transaction ID : SA11A.81726090

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. FENISON, CURTIS, , ,

Mailing Address 4314 SHARON TRL

City
LAKELAND

State
FL

Zip Code
33810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRUMP OF THE LORD MINISTRIES

Occupation (for Individual)
MINISTRY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2019

Transaction ID : SA11A.81699929

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. FERENCE, DUANE, P., MR.,

Mailing Address 14586 SPERRY ROAD

City
NEWBURY

State
OH

Zip Code
44065-9715

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 ▼

306.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2019

Transaction ID : SA11A.81726866

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)..... ►

220.00