

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

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

FOR LINE NUMBER: PAGE 549 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. JOHNSON, KAREN, L., MRS.,**

Mailing Address 2742 E. MAPLE ROAD

City  
JEFFERSON

State  
OH

Zip Code  
44047-9445

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 ▼

240.00

Date of Receipt

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

Transaction ID : SA11A.81720881

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

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

**B. JOHNSON, MARY, ELLEN, MS.,**

Mailing Address 14 HIGH BLF.

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677-4257

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 ▼

513.75

Date of Receipt

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

Transaction ID : SA11A.81715949

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. JOHNSON, MARY, ETTA, ,**

Mailing Address 20706 CORNISH RD

City  
MOUNT VERNON

State  
OH

Zip Code  
43050-9200

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 ▼

210.00

Date of Receipt

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

Transaction ID : SA11A.81725697

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)..... ►

150.00