

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 2527 OF 27511
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. DEUTH, DEE, , ,

Mailing Address 3481 ADELE LANE

City
BETTENDORFState
IAZip Code
52722-8811FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2019

Transaction ID : SA11A.81666037

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

B. DEWAR, DOUG, S., DR.,

Mailing Address 238 CASTLE DOWNS LANE

City
KNOXVILLEState
TNZip Code
37934-1223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2019

Transaction ID : SA11A.81666088

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

C. DILLEY, DARLENE, L., MRS.,

Mailing Address 139 AMMANN ROAD

City
BOERNEState
TXZip Code
78015-4671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DILLEY ALLERGYOccupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2019

Transaction ID : SA11A.81665952

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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

170.00

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