

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

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

FOR LINE NUMBER: PAGE 3908 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. MCTAGUE, GERALD, L., MR.,**

Mailing Address 9525 POST LANE

 City  
 SPOTSYLVANIA

 State  
 VA

 Zip Code  
 22551-3327

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 J.M.C. ENTERPRIZES

 Occupation (for Individual)  
 DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11A.81893631

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

**B. MEADOWS, SUE, , MRS.,**

Mailing Address P.O. BOX 293

 City  
 LOWNDESBORO

 State  
 AL

 Zip Code  
 36752-0293

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 HOMEMAKER

 Occupation (for Individual)  
 HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : SA11A.81835463

Amount of Each Receipt this Period

300.00

☐ Memo Item  
 CONTRIBUTION

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

**C. MEEKS, SHANNON, , MS.,**

Mailing Address P.O. BOX 913

 City  
 MOUNTAIN VIEW

 State  
 WY

 Zip Code  
 82939-0913

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 ALLIANCE CASE MANAGEMENT

 Occupation (for Individual)  
 REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

862.50

Date of Receipt

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

Transaction ID : SA11A.81835739

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

450.00

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