

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

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

FOR LINE NUMBER: PAGE 7219 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. BROWNE, DIANA, D., MRS.,**

Mailing Address 3207 CLUB POINT WAY

City  
GAINESVILLE

State  
GA

Zip Code  
30506-1638

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 ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11A.82056117

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. BROWNELL, E., ANN, MRS.,**

Mailing Address 7738 CALLE FACIL

City  
SARASOTA

State  
FL

Zip Code  
34238-4556

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 ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11A.82056681

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. BROWN, JEFFRY, M., MR.,**

Mailing Address 4311 TIEDEMAN RD

City  
BROOKLYN

State  
OH

Zip Code  
44144-2324

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 ▼

1915.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11A.82053681

Amount of Each Receipt this Period

40.00

☐ Memo Item  
CONTRIBUTION

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

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

165.00