

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

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

 FOR LINE NUMBER:  
 (check only one)

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<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
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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. LARKIN, MICHAEL, J., MR.,**

Mailing Address 301 1ST STREET NORTH WEST APT 405

 City  
 ORTONVILLE

 State  
 MN

 Zip Code  
 56278-1474

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 RETIRED

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
09	19	2019

Transaction ID : SA11A.82093832

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

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

**B. LARKIN, MICHAEL, J., MR.,**

Mailing Address 301 1ST STREET NORTH WEST APT 405

 City  
 ORTONVILLE

 State  
 MN

 Zip Code  
 56278-1474

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 RETIRED

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
09	19	2019

Transaction ID : SA11A.82120162

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

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

**C. LARSON, ANDREW, J., MR.,**

Mailing Address 474 GRAY WOOD DR

 City  
 BALLWIN

 State  
 MO

 Zip Code  
 63011-3461

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 UNEMPLOYED

 Occupation (for Individual)  
 UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	D D	Y Y Y Y
09	19	2019

Transaction ID : SA11A.82123787

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

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

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