

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

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

FOR LINE NUMBER: PAGE 11496 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. MORIN, BARBARA, JEAN, MRS.,**

Mailing Address 28744 TELEGRAPH RD APT 610

City  
FLAT ROCK

State  
MI

Zip Code  
48134-1577

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 ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : SA11A.82239896

Amount of Each Receipt this Period

10.00

☐ Memo Item  
CONTRIBUTION

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

**B. MORRISS, DANIELLE, , ,**

Mailing Address 223 E FRONT ST

City  
CLARE

State  
IA

Zip Code  
50524-7613

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRAVEL NURSING

Occupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : SA11A.82208908

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. MORROW, DANIEL, V., MR.,**

Mailing Address 108 NATURAL BRIDGE

City  
HARTSELLE

State  
AL

Zip Code  
35640-5263

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RUSCORR LLC

Occupation (for Individual)  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1291.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : SA11A.82208909

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

110.00