

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

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

FOR LINE NUMBER: PAGE 13283 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. NOWAK, CATHY, , ,**

Mailing Address 312 AVIATION AVE

City  
SCHERTZ

State  
TX

Zip Code  
78154-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SKIN REJUVENATION CLINIQUE

Occupation (for Individual)  
AESTHETICS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : SA11A.82306391**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. O'CONNOR, DANIEL, G., MR.,**

Mailing Address 1513 VIA MADONNA

City  
ENGLEWOOD

State  
FL

Zip Code  
34224

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : SA11A.82322615**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. O'ROURKE, PETER, J., MR.,**

Mailing Address P.O. BOX 2215

City  
LEBANON

State  
TN

Zip Code  
37088-2215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
R J CORMAN

Occupation (for Individual)  
RAILROAD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

447.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : SA11A.82272543**

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)..... ►

300.00