

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

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

FOR LINE NUMBER: PAGE 14483 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. BURDEN, CHILDS, FRICK, MR.,

Mailing Address 22857 CARTERS FARM LANE

City
MIDDLEBURG

State
VA

Zip Code
20117-3013

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2019

Transaction ID : SA11A.82337613

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. BURGE, JAMES, E., DR.,

Mailing Address 185 GROVEPORT PIKE UNIT 6D

City
CANAL WINCHESTER

State
OH

Zip Code
43110-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2019

Transaction ID : SA11A.82373382

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. BURGER, JOE, , ,

Mailing Address 15 TRALEE LOOP

City
PAWLEYS ISLAND

State
SC

Zip Code
29585-6787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2019

Transaction ID : SA11A.82407801

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

320.00