

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. SCHAEFER, GEORGE, , MR.,

Mailing Address 851 DELAWARE RIDGE LN.

City
CINCINNATIState
OHZip Code
45226-1758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIFTH THIRD BANCORPOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2019

Transaction ID : SA11A.1718930

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

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

B. SHIVELY, KATHRYN, S., ,

Mailing Address 549 LOVERS LN.

City
STEUBENVILLEState
OHZip Code
43953-3312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2019

Transaction ID : SA11A.1719822

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CONTRIBUTION

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

C. SIBCY, ROBERT, N., ,

Mailing Address 8044 MONTGOMERY RD., STE. 300

City
CINCINNATIState
OHZip Code
45236-2922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SIBCY CLINE REALTORSOccupation (for Individual)
PRESIDENT

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
 02 / 05 / 2019

Transaction ID : SA11A.1718294

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).....▶

1550.00