

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| LOS GATOS | CA | 95032 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 14 | / | 2015 |

Transaction ID : SA11AI.82583

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. MR C GEORGE HANSON 371 JR

Mailing Address 914 TRINITY DR

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| MURFREESBORO | TN | 37129 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 14 | / | 2015 |

Transaction ID : SA11AI.82590

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MRS K HARDY 054

Mailing Address 1590 KELLOGG BAY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| VERGENNES | VT | 05491 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 04 | / | 2015 |

Transaction ID : SA11AI.82601

Amount of Each Receipt this Period

25.00

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

350.00

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