

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

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

FOR LINE NUMBER: PAGE 44 OF 268

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Florida Federal Account**

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

A. **Huson, Roger, , ,**

Mailing Address 33 Maple Avenue

City  
Shalimar

State  
FL

Zip Code  
32579-1132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2018

Transaction ID : AC43F81C339984FCAA88

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. **Jensen, Gary, , ,**

Mailing Address 2291 Britt Road

City  
Cantonment

State  
FL

Zip Code  
32533-4659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
swimming pool sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2018

Transaction ID : A3FD48DEE8DDD4452A46

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

C. **Choate, Arthur, , ,**

Mailing Address 1390 S Dixie Highway  
Ste. 2221

City  
Coral Gables

State  
FL

Zip Code  
33146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2018

Transaction ID : ACC3C1F2661384C2B8D1

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

2180.00

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