

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

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

FOR LINE NUMBER: PAGE 25 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Kansas Republican Party**

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

**A. Highland, Ron, , ,**

Mailing Address 27487 Wells Creek Rd

City  
Wamego

State  
KS

Zip Code  
66547-1867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

KS Legislature

Occupation (for Individual)

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : A9D13CC38BD5C4570A90**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. HOCHSCHEID, ELIZABETH, R., ,**

Mailing Address 9548 Buena Vista

City

Overland Park

State

KS

Zip Code

66207-3531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Capitol Federal

Occupation (for Individual)

CUSTOMER SERVICE ASSOC ii

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 19 / 2019

**Transaction ID : ADDAB6D86166D441182C**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Hodgdon, Anne, , ,**

Mailing Address 20320 W 83rd St

City

Lenexa

State

KS

Zip Code

66220-3003

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 19 / 2019

**Transaction ID : A2AD10447D63D4577874**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

800.00