

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

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

FOR LINE NUMBER: PAGE 7021 OF 77320

(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. JOHNSON, CAROL, E., MS.,

Mailing Address 41317 S. LONG RD.

City
CHENEY

State
WA

Zip Code
99004-9361

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11A.76924163

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

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

B. JOHNSON, CHARLES, , ,

Mailing Address 4518 SPRINGFIELD DR.

City
COPLAY

State
PA

Zip Code
18037-2400

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 ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11A.76907900

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. JOHNSON, CINDY, , MRS.,

Mailing Address 68610 244TH ST

City
DASSEL

State
MN

Zip Code
55325-3375

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 BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : SA11A.76912811

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

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

320.00