

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

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

FOR LINE NUMBER: PAGE 534 OF 15116

(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. DEMESA, PRAXEDES, , MS.,**

Mailing Address 10750 OAKWILDE AVE

City  
STOCKTON

State  
CA

Zip Code  
95212-9249

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOOD SAMARITAN

Occupation (for Individual)  
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.75

Date of Receipt

08 / 01 / 2019

**Transaction ID : SA11A.81181915**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**B. DENO, DON, E., MR.,**

Mailing Address 2011 FAIRWAY DR.

City  
RICHLAND

State  
WA

Zip Code  
99352-9783

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 ▼

642.50

Date of Receipt

08 / 01 / 2019

**Transaction ID : SA11A.81181916**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

**C. DIAZ SALDANA, ALBERTO, , DR.,**

Mailing Address 22 AVENUE OF THE OAKS

City  
BEAUMONT

State  
TX

Zip Code  
77707-1802

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OPHTHALMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

08 / 01 / 2019

**Transaction ID : SA11A.81181919**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

300.00