

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

FOR LINE NUMBER: PAGE 4405 OF 15116

(check only one)

| | | | | | | | | |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

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

A. DELAIR, MICHAEL, R., MR., SR.

Mailing Address 2210 DAIRY FRAM RD

City
GAMBRILLSState
MDZip Code
21054-1256FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08 | 12 | 2019 |

Transaction ID : SA11A.81394241

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. DELCOURT, CHARLES, HENRY, MR.,

Mailing Address 91 HUMMOCK POND RD

City
NANTUCKETState
MAZip Code
02554-2615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.50

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08 | 12 | 2019 |

Transaction ID : SA11A.81391340

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. DELGADO, JUAN, , ,

Mailing Address 320 SHAW BLVD

City
FORT MYERSState
FLZip Code
33905-2732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
HVAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08 | 12 | 2019 |

Transaction ID : SA11A.81392934

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

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

185.00

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