

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

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

FOR LINE NUMBER: PAGE 6231 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. WAGNER, JOHN, O., MR.,**

Mailing Address 1517 ELKHORN DR.

City  
CHEYENNE

State  
WY

Zip Code  
82007-2928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAGPUL INDUSTRIES

Occupation (for Individual)  
LABOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

08 / 14 / 2019

**Transaction ID : SA11A.81434388**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**B. WAITS-FUENTES, DARLENE, URIDEL, MS.,**

Mailing Address 7861 E RITCHIE STREET

City  
LONG BEACH

State  
CA

Zip Code  
90808-3136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1383.80

Date of Receipt

08 / 14 / 2019

**Transaction ID : SA11A.81425852**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. WAITS-FUENTES, DARLENE, URIDEL, MS.,**

Mailing Address 7861 E RITCHIE STREET

City  
LONG BEACH

State  
CA

Zip Code  
90808-3136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1383.80

Date of Receipt

08 / 14 / 2019

**Transaction ID : SA11A.81454052**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

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

175.00