

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

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

FOR LINE NUMBER: PAGE 9421 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. COAKLEY, ELLEN, M., MS.,**

Mailing Address 397 ADAMS ST

City  
MILTON

State  
MA

Zip Code  
02186-4244

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 ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2019

**Transaction ID : SA11A.81549680**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

**B. COATS, HELEN, R., MS.,**

Mailing Address P.O. BOX 745

City  
CAMBRIDGE

State  
OH

Zip Code  
43725-0745

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2019

**Transaction ID : SA11A.81553281**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**C. COBB, GARRY, LEON, MR., SR.**

Mailing Address 26734 PEACH ST SPC 70

City  
PERRIS

State  
CA

Zip Code  
92570-9243

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 ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2019

**Transaction ID : SA11A.81544660**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

195.00