

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

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

FOR LINE NUMBER: PAGE 12553 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. WHITE, DENNIS, , ,

Mailing Address 2865 LENOX RD NE  
APT 607

City  
ATLANTA

State  
GA

Zip Code  
30324-2887

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLIANT HEALTH SOLUTIONS

Occupation (for Individual)  
CHIEF EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 27 / 2019

Transaction ID : SA11A.81580074

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

B. WHITEAKER RAMOS, ELIZABETH, , MRS.,

Mailing Address 5710 WHISPERING WILLOW WAY

City

FORT MYERS

State

FL

Zip Code

33908-4506

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 ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 27 / 2019

Transaction ID : SA11A.81623317

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

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

C. WHITE, GAYLA, , ,

Mailing Address 117 SO MAIN ST

City

BERKLEY

State

MA

Zip Code

02779-2001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHCOAST HOSPITAL

Occupation (for Individual)  
RESPIRATORY THERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 27 / 2019

Transaction ID : SA11A.81580076

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

145.00