

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

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

FOR LINE NUMBER:
(check only one)

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☒ 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. BURCH, JENNIFER, , ,

Mailing Address 25 SALISBURY COVE

City
EADS

State
TN

Zip Code
38028-3575

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METHODIST HELTHCARE

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2019

Transaction ID : SA11A.81635088

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. BURKE, GERALD, E., ,

Mailing Address 3823 FAIRWOOD BLVD NE

City
TACOMA

State
WA

Zip Code
98422-2455

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUMMIT

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2019

Transaction ID : SA11A.81635904

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. BURKHARDT, JOE, , ,

Mailing Address 15810 WOODLAWN BEACH
171

City
HICKORY CORNERS

State
MI

Zip Code
49060-9555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRONSON HOSPITAL

Occupation (for Individual)
ORTHOPAEDIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2019

Transaction ID : SA11A.81636029

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

385.00