

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. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3659325.10

Date of Receipt

01 / **16** / **2020**

Transaction ID : SA11C.85616824304866

Amount of Each Receipt this Period

100.00

☒ Memo Item
CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

B. SPINA, PETER, A., MR.,

Mailing Address 41 IVY PLACE

City
WAYNE

State
NJ

Zip Code
07470-6140

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LINCOLN OF WAYNE

Occupation (for Individual)
CEO/PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / **16** / **2020**

Transaction ID : SA11A.85622232

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3659325.10

Date of Receipt

01 / **16** / **2020**

Transaction ID : SA11C.85616824304868

Amount of Each Receipt this Period

100.00

☒ Memo Item
CONTRIBUTION

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

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

100.00