

# **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)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

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

**A. RIZOR, CARL, , ,**

Mailing Address 4082 JESSAMINE PL.

City  
COLUMBUS

State  
OH

Zip Code  
43207-4774

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 ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2019

Transaction ID : SA11A.1723511

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**B. ROBE, EDWARD, S., ,**

Mailing Address 19 ROOSEVELT DR.

City  
ATHENS

State  
OH

Zip Code  
45701-1761

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 18 / 2019

Transaction ID : SA11A.1723657

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. ROUSENBERG, CARL, F., MR.,**

Mailing Address 36829 TOWNSHIP RD. 2067

City  
JERUSALEM

State  
OH

Zip Code  
43747-9713

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2019

Transaction ID : SA11A.1723333

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

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

2800.00