

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

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

FOR LINE NUMBER: PAGE 33 OF 106

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

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

A. SMITH, H., DOYLE, ,

Mailing Address 19156 BLOSSER RD.

City  
DALTONState  
OHZip Code  
44618-9449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 13 / 2019

Transaction ID : SA11A.1723479

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

B. SMITH, H., DOYLE, ,

Mailing Address 19156 BLOSSER RD.

City  
DALTONState  
OHZip Code  
44618-9449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID : SA11A.1723691

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. SMITH, JUDITH, , ,

Mailing Address 138 LAKEVIEW LANE

City  
CHAGRIN FALLSState  
OHZip Code  
44022-4228FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KA SMITHGROUP, INC.Occupation (for Individual)  
OWNER

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  
06 / 11 / 2019

Transaction ID : SA11A.1723403

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).....▶

550.00