

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. CHANDLER, TYRA, , MRS.,

Mailing Address 16890 BRIARCLIFF POINTE CIRCLE

City
ANCHORAGE

State
AK

Zip Code
99516-5432

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2018

Transaction ID : SA11A.76495544

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. CHANG, FRANK, S. H., DR.,

Mailing Address 10050 N SPANISH BAY

City
FRESNO

State
CA

Zip Code
93720-3424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CMI RADIOLOGY

Occupation (for Individual)
RADIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2018

Transaction ID : SA11A.76503734

Amount of Each Receipt this Period

42.00

☐ Memo Item
CONTRIBUTION

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

C. CHANG, PAUL, M., MR.,

Mailing Address 17923 ARLINE AVENUE D

City
ARTESIA

State
CA

Zip Code
90701-4181

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KINDRED HOSPITAL WESTMINSTER

Occupation (for Individual)
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2018

Transaction ID : SA11A.76497110

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

642.00