

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

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

FOR LINE NUMBER: PAGE 10972 OF 17259

(check only one)

☒ 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. GRAY, JAMES, W., MR., III

Mailing Address 161 LAKE OTIS ROAD

City
WINTER HAVEN

State
FL

Zip Code
33884-1061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GRAY TRUCK LINE COMPANY

Occupation (for Individual)
TRANSPORTATION EXECUTIVE

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
12 / 21 / 2018

Transaction ID : SA11A.77544038

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. GREBING, MILDRED, , MRS.,

Mailing Address 398 PCR 428

City
FROHNA

State
MO

Zip Code
63748-8113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1696.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : SA11A.77541577

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. GRECO, RAYMOND, , MR.,

Mailing Address 22 CURTIS STREEET

City
MARBLEHEAD

State
MA

Zip Code
01945-2402

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 ▼

516.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : SA11A.77544435

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

600.00

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