

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

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

FOR LINE NUMBER: PAGE 70 / 603

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Dean Fejes

Mailing Address 255 Cocohatchee Drive

City

Naples

State

FL

Zip Code

34110-2102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: 70830.C1403603

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jane Felker

Mailing Address 4329 N. Lake Orlando Pkwy.

City

Orlando

State

FL

Zip Code

32808-1323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: 70809.C1402058

Amount of Each Receipt this Period

90.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rose Fernandez

Mailing Address 13438 Fort King Road

City

Dade City

State

FL

Zip Code

33525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Primary Medical Care

Occupation  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 7

Transaction ID: 70717.C1399920

Amount of Each Receipt this Period

400.00

Receipt

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

1490.00

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