

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. GRAVELL, PATRICIA, GAIL, MS.,

Mailing Address 183 MCGREGOR RD

City
DELAND

State
FL

Zip Code
32720-8645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELAND SMILES

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2018

Transaction ID : SA11A.76359296

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. GRAY, GREG, , ,

Mailing Address 32384 TWO INLETS DR.

City
PARK RAPIDS

State
MN

Zip Code
56470-4005

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2018

Transaction ID : SA11A.76372504

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. GRAY, JAMES, D., MR.,

Mailing Address 1831 COVENTRY DRIVE

City
MEMPHIS

State
TN

Zip Code
38127-3305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVIATION REPAIR TECHNOLOGIES

Occupation (for Individual)
AIRCRAFT MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2018

Transaction ID : SA11A.76361873

Amount of Each Receipt this Period

600.00

☐ Memo Item
CONTRIBUTION

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

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

660.00