

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15950 OF 16715

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 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. HASLAM, NATALIE, L., MRS.,

Mailing Address P.O. BOX 10146

 City
 KNOXVILLE

 State
 TN

 Zip Code
 37939-0146

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 HOMEMAKER

 Occupation (for Individual)
 HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : SA17.76410259

Amount of Each Receipt this Period

☐ Memo Item

CONVENTION ACCOUNT CONTRIBUTION

CONVENTION ACCOUNT

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

B. HUBBARD, KAREN, H., MRS.,

Mailing Address 2289 RIVER ROAD SOUTH

 City
 LAKELAND

 State
 MN

 Zip Code
 55043-9775

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 HOMEMAKER

 Occupation (for Individual)
 HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : SA17.76410256

Amount of Each Receipt this Period

☐ Memo Item

CONVENTION ACCOUNT CONTRIBUTION

CONVENTION ACCOUNT

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

C. HUBBARD, STANLEY, S., MR.,

Mailing Address 3415 UNIVERSITY AVENUE W.

 City
 SAINT PAUL

 State
 MN

 Zip Code
 55114-1019

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 HUBBARD BROADCASTING, INC.

 Occupation (for Individual)
 CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : SA17.76410257

Amount of Each Receipt this Period

☐ Memo Item

CONVENTION ACCOUNT CONTRIBUTION

CONVENTION ACCOUNT

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

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