

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. IOWA REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 09 / 25 / 2018	
Mailing Address 621 EAST 9TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB22-2018M1 Amount of Each Disbursement this Period [REDACTED] 3799.00	
City DES MOINES	State IA	Zip Code 50309	Category/ Type
Purpose of Disbursement IN-KIND OFFICE EQUIPMENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/> SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER OFFICE EQUIPMENT
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. OHIO REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 09 / 25 / 2018	
Mailing Address 211 SOUTH 5TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB22-2018M1 Amount of Each Disbursement this Period [REDACTED] 5699.40	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type
Purpose of Disbursement IN-KIND OFFICE EQUIPMENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/> SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER OFFICE EQUIPMENT
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. CALIFORNIA REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018	
Mailing Address 1121 L STREET, STE 207		FEC Identification Number C [REDACTED] Transaction ID : SB22-2018M1 Amount of Each Disbursement this Period [REDACTED] 5699.40	
City SACRAMENTO	State CA	Zip Code 95814	Category/ Type
Purpose of Disbursement IN-KIND OFFICE EQUIPMENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/> SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER OFFICE EQUIPMENT
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional)..... ▶	[REDACTED] 15197.80
TOTAL This Period (last page this line number only)..... ▶	[REDACTED]