

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

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

FOR LINE NUMBER: PAGE 17 OF 116

(check only one)

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

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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

A. GANTT, GREGORY, M., ,

Mailing Address 130 W. SECOND ST.
 SUITE 310 STE. 310

City
 DAYTON

State
 OH

Zip Code
 45402-1534

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 SELF

Occupation (for Individual)
 ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2019

Transaction ID : SA11A.1731025

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

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

B. GAST, ALAN, , MR.,

Mailing Address 3939 ERIE AVE.
 APT. 2040

City
 CINCINNATI

State
 OH

Zip Code
 45208-1972

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 08 / 2019

Transaction ID : SA11A.1730434

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

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

C. GIANNOPOULOS, STELIOS, , MR.,

Mailing Address 247 N. PARKVIEW AVE.

City
 BEXLEY

State
 OH

Zip Code
 43209-1437

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 GIANNOPOULOS PROPERTIES

Occupation (for Individual)
 REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 19 / 2019

Transaction ID : SA11A.1730829

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

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

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

700.00