

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

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

FOR LINE NUMBER: PAGE 23 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. KOHORST, RITA, M., ,

Mailing Address 13 JUSTICIA LN.

City
CINCINNATI

State
OH

Zip Code
45218-1221

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 ▼

1950.00

Date of Receipt

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

Transaction ID : SA11A.1730820

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. LANGSTON, KEVIN, L., MR.,

Mailing Address 8299 VENTLE DR.

City
WEST CHESTER

State
OH

Zip Code
45069-2711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OXFORD GLOBAL SERVICES

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 20 / 2019

Transaction ID : SA11A.1730919

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. LEATHERBERRY, RACHEL, , ,

Mailing Address 2 MIRADA DR. S

City
LEWIS CENTER

State
OH

Zip Code
43035-7767

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DR. JAMES HUTTA

Occupation (for Individual)
DENTAL OFFICE STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2019

Transaction ID : SA11A.1730401

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

675.00