

**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)	PAGE 6182 OF 14350
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Ms. Marie Noell Langan
Full Name (Last, First, Middle Initial)

Mailing Address 345 E. 93rd Street
Aparment 2F

City New York State NY Zip Code 10128-5516

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 09 / 2012
Transaction ID : 2012M09L11A118520

Amount of Each Receipt this Period
250.00

B. Ms. Marie Noell Langan
Full Name (Last, First, Middle Initial)

Mailing Address 345 E. 93rd Street
Aparment 2F

City New York State NY Zip Code 10128-5516

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 10 / 2012
Transaction ID : 2012M09L11A118521

Amount of Each Receipt this Period
250.00

C. Mr. Arnold G. Langbo
Full Name (Last, First, Middle Initial)

Mailing Address 189 Upper Springs Road

City Stowe State VT Zip Code 05672-5079

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 21 / 2012
Transaction ID : 2012M09L11A118522

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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