

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4518 OF 5670

(check only one)

<input checked="" 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 type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

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

**A. SCHILLING, CURTIS, , ,**

Mailing Address 3 STURBRIDGE ROAD

City  
MEDFIELDState  
MAZip Code  
02052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOWIE CARR RADIO NETWORKOccupation (for Individual)  
RADIO SHOW HOST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M	D D	Y Y Y Y
05	12	2017

Transaction ID : SA11AI.550963

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. SCHILLING, CURTIS, , ,**

Mailing Address 3 STURBRIDGE ROAD

City  
MEDFIELDState  
MAZip Code  
02052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOWIE CARR RADIO NETWORKOccupation (for Individual)  
RADIO SHOW HOST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M	D D	Y Y Y Y
06	12	2017

Transaction ID : SA11AI.550964

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. SCHILLING, DAVID, , ,**

Mailing Address 7690 COUNTY HWY 134

City  
NEVADAState  
OHZip Code  
44849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
06	19	2017

Transaction ID : SA11AI.550967

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

550.00

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