

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

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

FOR LINE NUMBER: PAGE 258 OF 940

(check only one)

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

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NAME OF COMMITTEE (In Full)

**TRUMP VICTORY**

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

**A. LACORTE, WILLIAM, , DR.,**

Mailing Address 519 METAIRIE RD  
SUITE 100

City  
METAIRIE

State  
LA

Zip Code  
70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTREPRENEUR

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 14 / 2019

Transaction ID : SA11AI.35268

Amount of Each Receipt this Period

50000.00

☒ Memo Item

PERMISSIBLE FUNDS: NORTHLINE INVESTMENTS, LLC

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

**B. LACORTE, WILLIAM, , DR.,**

Mailing Address 519 METAIRIE RD  
SUITE 100

City  
METAIRIE

State  
LA

Zip Code  
70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTREPRENEUR

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 10 / 2019

Transaction ID : SA11AI.33393

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. LALA, GREGORY, , ,**

Mailing Address 9 SAWMILL LANE

City  
MANDEVILLE

State  
LA

Zip Code  
70471

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DIXIE RV SUPERSTORES

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2019

Transaction ID : SA11AI.32917

Amount of Each Receipt this Period

35000.00

☐ Memo Item

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

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

40000.00