

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

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

FOR LINE NUMBER: PAGE 1357 OF 1801

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

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

A. RODGERS, FRANCIS, , ,

Mailing Address 966 SPRING GARDEN RD

City  
PORT NORRIS

State  
NJ

Zip Code  
08349-3717

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.1805370

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

B. RODRIGUEZ, ANTONIA, , ,

Mailing Address 2609 CAMI PATH

City  
ROUND ROCK

State  
TX

Zip Code  
78665-4601

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 12 / 2019

Transaction ID : SA11A.1774206

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

C. RODRIGUEZ, DAVID, , ,

Mailing Address 417 S. ASTELL AVE.

City  
WEST COVINA

State  
CA

Zip Code  
91790-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11A.1788656

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

175.00

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