

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

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

FOR LINE NUMBER: PAGE 1380 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. RUBEL, MIKE, , ,

Mailing Address 4815 GREEN CREST

City
YORBA LINDA

State
CA

Zip Code
92887-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2019

Transaction ID : SA11A.1796729

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. RUBEL, MIKE, , ,

Mailing Address 4815 GREEN CREST

City
YORBA LINDA

State
CA

Zip Code
92887-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

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

Transaction ID : SA11A.1803483

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. RUBINSTEIN, BORIS, , ,

Mailing Address 67-90 GROTON STREET

City
FOREST HILLS

State
NY

Zip Code
11375-4122

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 / 05 / 2019

Transaction ID : SA11A.1796731

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

125.00

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