

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

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

FOR LINE NUMBER: PAGE 1457 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. SHELLEN, PEGGY, , ,**

Mailing Address 364 LYNN OAK DR.

City  
LAVALETTE

State  
WV

Zip Code  
25535-8018

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 ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2019

**Transaction ID : SA11A.1803791**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. SHELTON, GEORGE, P., ,**

Mailing Address 4124 KINGSFERRY DRIVE

City  
ARLINGTON

State  
TX

Zip Code  
76016-3636

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 ▼

1485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2019

**Transaction ID : SA11A.1796889**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. SHELTON, GEORGE, P., ,**

Mailing Address 4124 KINGSFERRY DRIVE

City  
ARLINGTON

State  
TX

Zip Code  
76016-3636

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 ▼

1485.00

Date of Receipt

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

**Transaction ID : SA11A.1801889**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

200.00