

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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. MONDAY, CAROL, , ,

Mailing Address 1955 SAINT CLAIR AVE

City

EAST LIVERPOOL

State

OH

Zip Code

43920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2020

Transaction ID : SA11AI.60944

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4397]

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

B. MONDEJAR, IONE, , ,

Mailing Address 2368 COOKIES CROSSING CT

City

LAUGHLIN

State

NV

Zip Code

89029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HARRAHS LAUGHLIN

Occupation (for Individual)

CAGE CASHIER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2020

Transaction ID : SA11AI.103101

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4342]

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

C. MONDEJAR, IONE, , ,

Mailing Address 2368 COOKIES CROSSING CT

City

LAUGHLIN

State

NV

Zip Code

89029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HARRAHS LAUGHLIN

Occupation (for Individual)

CAGE CASHIER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2020

Transaction ID : SA11AI.103103

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

135.00

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