

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

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

FOR LINE NUMBER: PAGE 59850 OF 70256

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. STEFFEN, JOHN, , ,

Mailing Address 230 3RD ST

City

GLENWOOD CITY

State

WI

Zip Code

54013

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2020

Transaction ID : SA11AI.123990

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. STEFFEN, KERWIN, , ,

Mailing Address 3823 FOREST BEACH DRIVE NORTHWEST

City

GIG HARBOR

State

WA

Zip Code

98335

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CLEARCHOICE DENTAL IMPLANTS

Occupation (for Individual)

SURGEON

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 09 / 2020

Transaction ID : SA11AI.260346

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Memo Item

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

C. STEFFENHAGEN, WILLIAM, J, ,

Mailing Address 28264 N GILMER RD

City

MUNDELEIN

State

IL

Zip Code

60060

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 10 / 2020

Transaction ID : SA11AI.260344

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Memo Item

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

2050.00

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