

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

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

FOR LINE NUMBER: PAGE 70 OF 1896

(check only one)

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

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NAME OF COMMITTEE (In Full)

TRUMP VICTORY

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

A. BENEVENTO, FRANCESCA, , ,

Mailing Address 120 WALKER DR

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2019

Transaction ID : SA11AI.45197

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. BENNETT, DONNA, , ,

Mailing Address 395 BAY SHORE AVE

City
LONG BEACH

State
CA

Zip Code
90803

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 ▼

1500.00

Date of Receipt

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

Transaction ID : SA11AI.43241

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

C. BENNETT, ELAYNE, , ,

Mailing Address 4 LAUREL PKWY

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BEST FRIENDS FOUNDATION

Occupation (for Individual)

PRESIDENT AND FOUNDER

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 / 23 / 2019

Transaction ID : SA11AI.44345

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

2750.00

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