

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

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

FOR LINE NUMBER: PAGE 380 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. GOZINI, FARAH, , ,**

Mailing Address 9903 SANTA MONICA BLVD 988

City  
BEVERLY HILLS

State  
CA

Zip Code  
90212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GOOD EYE OPTOMETRY

Occupation (for Individual)  
OPTOMETRIST

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 / 10 / 2019

Transaction ID : SA11AI.43455

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

**B. GRAHAM, CHARLENE, B, MRS.,**

Mailing Address 2211 LYTLE ST SE

City  
HUNTSVILLE

State  
AL

Zip Code  
35801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA11AI.45073

Amount of Each Receipt this Period

240.00

☐ Memo Item

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

**C. GRAHAM, DARLENE, , MRS.,**

Mailing Address 46361 COUNTRY LAKE DRIVE

City  
ST CLAIRSVILLE

State  
OH

Zip Code  
43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MURRAY ENERGY

Occupation (for Individual)  
HR ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

Transaction ID : SA11AI.40445

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2240.00