

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

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

FOR LINE NUMBER: PAGE 707 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. MUKHITDINOV, ASKAR, , ,

Mailing Address 845 UNITED NATIONS PLAZA APT 40B

City
NEW YORK

State
NY

Zip Code
10017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CURTIS MALLET-PREVOST COLT & MOSLE LLP

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2019

Transaction ID : SA11AI.44216

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

B. MULDREW, RYAN, , MR.,

Mailing Address 70407 WHITEWOOD DRIVE

City
BRIDGEPORT

State
OH

Zip Code
43912

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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2019

Transaction ID : SA11AI.40070

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. MULLEN, ROSE, , ,

Mailing Address 117 COLWICK RD

City
CHERRY HILL

State
NJ

Zip Code
08002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NORFOLK ANESTHESIA SERVICES PC

Occupation (for Individual)

CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2019

Transaction ID : SA11AI.44167

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

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

5900.00