

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Committee To Defend The President**

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

**A. GALLEGOS, MICHAEL, , ,**

Mailing Address 4905 EL HIGO CT SE

City  
RIO RANCHO

State  
NM

Zip Code  
87124-1300

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2020

**Transaction ID : SA11A.1961060**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. GAMACHE, MARIANNA, R., MRS,**

Mailing Address P.O. BOX 435

City  
SWANTON

State  
VT

Zip Code  
05488-0435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF VERMONT

Occupation (for Individual)  
LEGISLATOR

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  
03 / 17 / 2020

**Transaction ID : SA11A.1954925**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**C. GAMACHE, MARIANNA, R., MRS,**

Mailing Address P.O. BOX 435

City  
SWANTON

State  
VT

Zip Code  
05488-0435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATE OF VERMONT

Occupation (for Individual)  
LEGISLATOR

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  
03 / 27 / 2020

**Transaction ID : SA11A.1961066**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

100.00