

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

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

FOR LINE NUMBER: PAGE 11 OF 1035

(check only one)

☒ 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. AHL, THOMAS, , ,

Mailing Address 1750 BEL AIRE PLACE

City
LIMAState
OHZip Code
45805-3939FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOM AHL CHRYSLER/DODGE, INC.Occupation (for Individual)
AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2020

Transaction ID : SA11A.1945532

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. AHL, THOMAS, , ,

Mailing Address 1750 BEL AIRE PLACE

City
LIMAState
OHZip Code
45805-3939FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOM AHL CHRYSLER/DODGE, INC.Occupation (for Individual)
AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2020

Transaction ID : SA11A.1969483

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. AHLBERG, ALAN, , ,

Mailing Address 5840 NW BIRCH AVE

City
HILLSBOROState
ORZip Code
97124-8560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : SA11A.1984513

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

235.00

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