

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

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

FOR LINE NUMBER: PAGE 602 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. METCALF, GEORGE, R., , III

Mailing Address 100 MOORINGS PARK DRIVE
F204

City
NAPLES

State
FL

Zip Code
34105-2165

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2020

Transaction ID : SA11A.1986165

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. METILDI, LEONARD, , ,

Mailing Address 4351 E LOHMAN AVE
320

City

LAS CRUCES

State
NM

Zip Code
88011-8262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MVRMC

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2020

Transaction ID : SA11A.1975978

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. METILDI, LEONARD, , ,

Mailing Address 4351 E LOHMAN AVE
320

City

LAS CRUCES

State
NM

Zip Code
88011-8262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MVRMC

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2020

Transaction ID : SA11A.1983769

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

200.00

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