

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

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

FOR LINE NUMBER: PAGE 9479 OF 60088

(check only one)

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

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NAME OF COMMITTEE (In Full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

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

**A. CLARK, CRYSTAL, , ,**

Mailing Address 1349 STATE ROUTE 222

City  
BETHEL

State  
OH

Zip Code  
45106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCY WEST HOSPITAL CINCINNATI

Occupation (for Individual)  
NURSE ANESTHETIST CRNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.53

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 02 / 2019

Transaction ID : SA11AI.148122

Amount of Each Receipt this Period

159.33

☐ Memo Item

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

**B. CLARK, CRYSTAL, , ,**

Mailing Address 1349 STATE ROUTE 222

City  
BETHEL

State  
OH

Zip Code  
45106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MERCY WEST HOSPITAL CINCINNATI

Occupation (for Individual)  
NURSE ANESTHETIST CRNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.73

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : SA11AI.148121

Amount of Each Receipt this Period

106.20

☐ Memo Item

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

**C. CLARK, DAVID, , ,**

Mailing Address 7456 BROTHERS LN

City  
WASHOE VALLEY

State  
NV

Zip Code  
89704

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 ▼

755.01

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2019

Transaction ID : SA11AI.148129

Amount of Each Receipt this Period

66.93

☐ Memo Item

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

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

332.46