

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

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

FOR LINE NUMBER: PAGE 13496 OF 60088

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

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

**A. DISKIN, MICHAEL, , ,**

Mailing Address 8195 GOTHAM RD

City  
GARRETTSVILLE

State  
OH

Zip Code  
44231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISKIN ENTERPRISES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

**Transaction ID : SA11AI.161108**

Amount of Each Receipt this Period

17.50

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4159]

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

**B. DISNEY, MIKE, , ,**

Mailing Address 210 ELM ST

City  
HIGHLANDS

State  
TX

Zip Code  
77562

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXONMOBIL

Occupation (for Individual)  
PLANNEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

184.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 03 / 2019

**Transaction ID : SA11AI.161109**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**C. DISNEY, MIKE, , ,**

Mailing Address 210 ELM ST

City  
HIGHLANDS

State  
TX

Zip Code  
77562

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXXONMOBIL

Occupation (for Individual)  
PLANNEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2019

**Transaction ID : SA11AI.161110**

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4250]

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

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

122.50