

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

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

FOR LINE NUMBER: PAGE 33478 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. MARTIN, JEFF, , ,

Mailing Address 7314 VENICE AVE NE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BCBSNM

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.225464

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4246]

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

B. MARTIN, JEFFREY, , ,

Mailing Address 44500 DANIEL DR

City  
SAINT CLAIRSVILLE

State  
OH

Zip Code  
43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 21 / 2019

Transaction ID : SA11AI.225466

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

C. MARTIN, JENNIFER, , ,

Mailing Address 2904 CHRIS LANE

City  
GRAPEVINE

State  
TX

Zip Code  
76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OSCD

Occupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.225468

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

435.00

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