

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

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

FOR LINE NUMBER: PAGE 36461 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. MINARDI, JEANNIE, , ,

Mailing Address 1011 WALNUT RD

City  
CHARLESTON

State  
WV

Zip Code  
25314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINARDI EYE CENTER

Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 04 / 2019

Transaction ID : SA11AI.235024

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. MINARDI, JEANNIE, , ,

Mailing Address 1011 WALNUT RD

City  
CHARLESTON

State  
WV

Zip Code  
25314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINARDI EYE CENTER

Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 13 / 2019

Transaction ID : SA11AI.235023

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4163]

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

C. MINARDI, JEANNIE, , ,

Mailing Address 1011 WALNUT RD

City  
CHARLESTON

State  
WV

Zip Code  
25314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINARDI EYE CENTER

Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 26 / 2019

Transaction ID : SA11AI.235022

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4191]

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

850.00

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