

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

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

FOR LINE NUMBER: PAGE 42064 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. PHILLIPS, LARRY, W, ,

Mailing Address 1712 20TH AVE

City
MONROE

State
WI

Zip Code
53566

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 ▼

519.00

Date of Receipt

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

Transaction ID : SA11AI.253019

Amount of Each Receipt this Period

42.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4246]

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

B. PHILLIPS, LARRY, W, ,

Mailing Address 1712 20TH AVE

City
MONROE

State
WI

Zip Code
53566

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 ▼

561.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2019

Transaction ID : SA11AI.253018

Amount of Each Receipt this Period

42.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4249]

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

C. PHILLIPS, LEONA, , ,

Mailing Address PO BOX 1265

City
ELVERTA

State
CA

Zip Code
95626

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 BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2019

Transaction ID : SA11AI.253025

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

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

194.00