

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

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

FOR LINE NUMBER:
(check only one)

PAGE 44799 OF 60088

☒ 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. RICHARDSON, BARBARA, , ,

Mailing Address PO BOX 768

City
SAINT CROIX FALLS

State
WI

Zip Code
54024

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 ▼

200.00

Date of Receipt

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

Transaction ID : SA11AI.261808

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4250]

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

B. RICHARDSON, BARBARA, , ,

Mailing Address PO BOX 768

City
SAINT CROIX FALLS

State
WI

Zip Code
54024

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 ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.261809

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.4250]

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

C. RICHARDSON, BECKY, , ,

Mailing Address 4600 W NORTHGATE DR

City
IRVING

State
TX

Zip Code
75062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INSUREAMERICA MANAGEMENT COMPANY LLC

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2019

Transaction ID : SA11AI.261812

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

235.00