

# **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)

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

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NAME OF COMMITTEE (In Full)

**The Committee To Defend The President**

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

**A. FRENCH, CATHY, , ,**

Mailing Address 7648 BROADVIEW DR.  
101

City  
HOUSTON

State  
TX

Zip Code  
77061-1606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GENNOA FRENCH ENTERPRISES, INC.

Occupation (for Individual)

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2019

**Transaction ID : SA11A.1764968**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

**B. FRESH, GREGORY, , ,**

Mailing Address 15810 51ST AVE N

City

MINNEAPOLIS

State

MN

Zip Code

55446-2223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHARTWELL FINANCIAL ADVISORY

Occupation (for Individual)

CORPORATE FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2019

**Transaction ID : SA11A.1765957**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. FRICKEY, ANITA, , ,**

Mailing Address 3070 ONTARIO STREET

City

COLUMBUS

State

OH

Zip Code

43224-4250

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 ▼

407.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2019

**Transaction ID : SA11A.1764519**

Amount of Each Receipt this Period

12.50

☐ Memo Item  
CONTRIBUTION

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

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

72.50