

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

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

FOR LINE NUMBER: PAGE 456 OF 1328

(check only one)

☒ 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. HAGER ANDERSON, SHERI, , ,

Mailing Address 566 HOSKINS LANE

City
ROCK SPRINGS

State
WY

Zip Code
82901-3124

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 ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2019

Transaction ID : SA11A.1764684

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. HAISCHER, PAUL, , ,

Mailing Address 1304 FAIRVIEW

City
HOUSTON

State
TX

Zip Code
77006-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALGREENS

Occupation (for Individual)
SERVICE CLERK

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
07 / 05 / 2019

Transaction ID : SA11A.1758952

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HAISCHER, PAUL, , ,

Mailing Address 1304 FAIRVIEW

City
HOUSTON

State
TX

Zip Code
77006-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALGREENS

Occupation (for Individual)
SERVICE CLERK

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
07 / 24 / 2019

Transaction ID : SA11A.1769299

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

100.00

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