

# **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 26671 OF 40507

☒ 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. O'BRIEN, JUDITH, , MS.,**

Mailing Address 929 LINWOOD AVE

City  
DELTA

State  
OH

Zip Code  
43515-1502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2019

Transaction ID : SA11AI.18744

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

**B. O'BRIEN, JUDITH, , MS.,**

Mailing Address 929 LINWOOD AVE

City  
DELTA

State  
OH

Zip Code  
43515-1502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2019

Transaction ID : SA11AI.18743

Amount of Each Receipt this Period

73.00

☐ Memo Item

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

**C. O'BRIEN, MARILYN, J, MS.,**

Mailing Address 250 E ALAMEDA ST

City  
SANTA FE

State  
NM

Zip Code  
87501

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 ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2019

Transaction ID : SA11AI.26654

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

253.00