

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29330 OF 40507

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

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

**A. QUINN, CHRISTOPHER, , ,**

Mailing Address 28 SIDLAW RD APT 5

City  
BRIGHTONState  
MAZip Code  
02135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TUFTS MEDICAL CENTEROccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	22	2019

Transaction ID : SA11AI.87771

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. QUINN, CLOVER, , ,**

Mailing Address 284 ROSE LN

City  
HAMILTONState  
MTZip Code  
59840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

153.00

Date of Receipt

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

Transaction ID : SA11AI.60555

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. QUINN, CLOVER, , ,**

Mailing Address 284 ROSE LN

City  
HAMILTONState  
MTZip Code  
59840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

163.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	07	2019

Transaction ID : SA11AI.60558

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

520.00

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