

**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 29370 OF 40507
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

A. RABALAIS, COLLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 DOUG DRIVE

City LAFAYETTE	State LA	Zip Code 70508-6300
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2019

Transaction ID : SA11AI.68521

Amount of Each Receipt this Period
269.61

Memo Item

B. RABAT, FLORINDA, ISABEL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3378 11TH ST

City ASTORIA	State NY	Zip Code 11106
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAREGIVER	Occupation (for Individual) CAREGIVER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
126.00

Date of Receipt

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

Transaction ID : SA11AI.26140

Amount of Each Receipt this Period
42.00

Memo Item

C. RABAT, FLORINDA, ISABEL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3378 11TH ST

City ASTORIA	State NY	Zip Code 11106
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAREGIVER	Occupation (for Individual) CAREGIVER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
168.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	04	/	2019

Transaction ID : SA11AI.26141

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	353.61
TOTAL This Period (last page this line number only).....	