

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

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

FOR LINE NUMBER: PAGE 544 OF 2113

(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. ENGLER, CARL, , ,**

Mailing Address 281 NORTH OHIO

City  
HUDSON

State  
WY

Zip Code  
82515-5075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAFeway

Occupation (for Individual)  
MEAT CUTTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 26 / 2019

Transaction ID : SA11A.1858120

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

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

**B. ENGLISH, WAYNE, , DR, JR.**

Mailing Address 4432 COUNTRY HILL RD

City  
FORT WORTH

State  
TX

Zip Code  
76140-8505

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 ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 21 / 2019

Transaction ID : SA11A.1853618

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

**C. ENGLISH, WAYNE, , DR, JR.**

Mailing Address 4432 COUNTRY HILL RD

City  
FORT WORTH

State  
TX

Zip Code  
76140-8505

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 ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 27 / 2019

Transaction ID : SA11A.1858124

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

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

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

70.00