

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

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

FOR LINE NUMBER: PAGE 5200 OF 6365

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. SHY, STEPHEN, , ,

Mailing Address 3170 RT 75

City  
HUNTINGTON

State  
WV

Zip Code  
25704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OVP

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 22 / 2017

Transaction ID : SA11AI.724397

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. SHY, STEPHEN, , ,

Mailing Address 3170 RT 75

City  
HUNTINGTON

State  
WV

Zip Code  
25704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OVP

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 22 / 2017

Transaction ID : SA11AI.724398

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. SHY, STEPHEN, , ,

Mailing Address 3170 RT 75

City  
HUNTINGTON

State  
WV

Zip Code  
25704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OVP

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2017

Transaction ID : SA11AI.724399

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

105.00

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