

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

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

FOR LINE NUMBER: PAGE 390 OF 1123

(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. GRAMA, GABRIELA, , ,**

Mailing Address 5030 N MARINE DR.  
1201

City  
CHICAGO

State  
IL

Zip Code  
60640-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVANCED MACHINE

Occupation (for Individual)  
ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 04 / 2019

**Transaction ID : SA11A.1740000**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. GRANT, BILL, , ,**

Mailing Address 159 MAIN STREET  
APT G

City  
LITTLE FALLS

State  
NJ

Zip Code  
07424-1440

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2019

**Transaction ID : SA11A.1753947**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**C. GRAVES, KATHY, , ,**

Mailing Address 29 E ROSEVEAR ST

City  
ORLANDO

State  
FL

Zip Code  
32804-3920

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 ▼

436.25

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 14 / 2019

**Transaction ID : SA11A.1736244**

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

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

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

135.00