

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

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

FOR LINE NUMBER: PAGE 459 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. HOLDREN, YVONNE, , ,**

Mailing Address 7465 E STONE CREEK LANE

City  
ANAHEIM

State  
CA

Zip Code  
92808-1367

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2019

Transaction ID : SA11A.1749142

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

**B. HOLLAND, STEVEN, , ,**

Mailing Address 905 S STORY STREET

City  
BOONE

State  
IA

Zip Code  
50036-5042

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 18 / 2019

Transaction ID : SA11A.1748995

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

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

**C. HOLLENQUEST, TABNI, , ,**

Mailing Address 6380 THORNWOOD DRIVE

City  
BELLEVILLE

State  
MI

Zip Code  
48111-5160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD

Occupation (for Individual)  
PURCHASING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11A.1736207

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)..... ►

90.00