

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

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

FOR LINE NUMBER: PAGE 736 OF 2269

(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. GARLITZ, LOISANN, , ,

Mailing Address P.O. BOX 102, 835 EAST MAIN STREET

City  
COKEVILLEState  
WYZip Code  
83114-0102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2019

Transaction ID : SA11A.1873275

Amount of Each Receipt this Period

7.75

☐ Memo Item  
 CONTRIBUTION

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

B. GARLITZ, LOISANN, , ,

Mailing Address P.O. BOX 102, 835 EAST MAIN STREET

City  
COKEVILLEState  
WYZip Code  
83114-0102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2019

Transaction ID : SA11A.1873276

Amount of Each Receipt this Period

8.25

☐ Memo Item  
 CONTRIBUTION

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

C. GARNEY, ELIZABETH, , ,

Mailing Address 4300 BAY AREA BLVD  
1621City  
HOUSTONState  
TXZip Code  
77058-1117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEMORIAL HERMANNOccupation (for Individual)  
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2019

Transaction ID : SA11A.1873278

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

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

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

41.00