

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

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

FOR LINE NUMBER: PAGE 19954 OF 34568

(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. MCCOMAS, MARY, L, ,

Mailing Address 404 TREASURE ISLAND RD

City
WEBSTER

State
MA

Zip Code
01570

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STAFF MATES HOME CARE

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2016

Transaction ID : SA11AI.747145

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MCCOMAS, THERESA, , ,

Mailing Address P O BOX 17427

City
SAN ANTONIO

State
TX

Zip Code
78217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCCOMAS WALLCOVERING & SUPPLY INC.

Occupation (for Individual)
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA11AI.716451

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. MCCOMB, MICHAEL, , ,

Mailing Address 2522 SYCAMORE HILLS DRIVE

City
FORT WAYNE

State
IN

Zip Code
46814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAPP MEDICAL

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2016

Transaction ID : SA11AI.642855

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

2900.00