



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**TRUMP VICTORY**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		3163638.95
(b) Cash on Hand at Beginning of Reporting Period.....	4609413.41	
(c) Total Receipts (from Line 19) .....	5290376.00	11075688.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9899789.41	14239327.34
7. Total Disbursements (from Line 31).....	4010158.89	8349696.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5889630.52	5889630.52
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**TRUMP VICTORY**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2017 To: M M / D D / Y Y Y Y 09 / 30 / 2017

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5254450.00	10941065.00
(ii) Unitemized .....	511.00	776.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5254961.00	10941841.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35000.00	70000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5289961.00	11011841.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	63432.39
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	415.00	415.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5290376.00	11075688.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5290376.00	11075688.39

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	507524.36	2648128.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	507524.36	2648128.87
22. Transfers to Affiliated/Other Party Committees.....	3502634.53	5632267.95
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	55850.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	13450.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	69300.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4010158.89	8349696.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4010158.89	8349696.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5289961.00	11011841.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	69300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5289961.00	10942541.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	507524.36	2648128.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	415.00	415.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	507109.36	2647713.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ADAMS, MACKENZIE, , ,**

Mailing Address 16039 AGINCOURT DR

City HUNTERSVILLE	State NC	Zip Code 28078
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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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

**Transaction ID : SA11AI.24045**

Amount of Each Receipt this Period  
2700.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ALLMAN, DAVID, , ,**

Mailing Address 5714 27TH ST N

City ARLINGTON	State VA	Zip Code 22207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IOMAX USA	Occupation (for Individual) GOV RELATIONS
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24022**

Amount of Each Receipt this Period  
2700.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. AMEND - CAFFEY, LAURA, , MRS.,**

Mailing Address 816 NORTHERN SHORES

City GREENSBORO	State NC	Zip Code 27455
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

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

**Transaction ID : SA11AI.24128**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ANTHONY, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 702 OBERLIN ROAD  
 SUITE 400  
 City RALEIGH State NC Zip Code 27605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANTHONY & CO. Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 18 / 2017  
**Transaction ID : SA11AI.24052**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**B. ATKINS, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 VERANDA PL  
 City GOLDSBORO State NC Zip Code 27530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHEASTERN MED ONCOLOGY CENTER Occupation (for Individual) MD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.24111**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

**C. ATKINS, SHERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 VERANDA PLACE  
 City GOLDSBORO State NC Zip Code 27530  
 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 ▼ 7500.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.24113**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. AUMAN, HOWARD, FRANK, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 PREYS STREET  
 City GREENSBORO State NC Zip Code 27410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24091**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. AUMAN, LINDSEY, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 PREYS STREET  
 City GREENSBORO State NC Zip Code 27410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LIFE COACH/ YOGA INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24093**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. AYOUB, SUE, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 818  
 City BEEVILLE State TX Zip Code 78104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24034**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5900.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BAMBERGER, DAVID, K., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13735 MORNINGBLUFF DR.

City SAN ANTONIO	State TX	Zip Code 78216
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) LANDLORD
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2017

**Transaction ID : SA11AI.24012**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BARRY, DENNIS, R., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3911 BRASS CANNON COURT

City GREENSBORO	State NC	Zip Code 27410
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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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2017

**Transaction ID : SA11AI.24063**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. BARRY, SUZANNE, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15085 BENDING BRAE COURT

City BROOKFIELD	State WI	Zip Code 53005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2017

**Transaction ID : SA11AI.23906**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BARRY, WILLIAM, E., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15085 BENDING BRAE COURT

City BROOKFIELD	State WI	Zip Code 53005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPEED SYSTEMS, INC.	Occupation (for Individual) SMALL BUSINESS OWNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2017

**Transaction ID : SA11AI.23902**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. BASS, DORIS, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4316 ST. JOHN'S DR.

City DALLAS	State TX	Zip Code 75205
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2017

**Transaction ID : SA11AI.23937**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. BAUM, DAVID, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 117

City JANESVILLE	State WI	Zip Code 53547
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) S.S.I. TECHNOLOGIES, INC.	Occupation (for Individual) C.E.O.
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24169**

Amount of Each Receipt this Period  
10000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BEAL, D., ANDREW, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6000 LEGACY DRIVE

City PLANO	State TX	Zip Code 75024
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEAL BANK	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

**Transaction ID : SA11AI.23918**

Amount of Each Receipt this Period  
100000.00

Memo Item

**B. BEAVERS, RICHARD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 WOODLAND DRIVE

City GREENSBORO	State NC	Zip Code 27408
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24170**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. BEDDOW, KATHLEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 EDINBURGH AVE

City PINEHURST	State NC	Zip Code 28374
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2017

**Transaction ID : SA11AI.24117**

Amount of Each Receipt this Period  
7500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	109500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BEDDOW, THOMAS, FENTON, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 EDINBURGH LAND

City PINEHURST	State NC	Zip Code 28374
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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 ▼  
7500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2017

**Transaction ID : SA11AI.24069**

Amount of Each Receipt this Period  
7500.00

Memo Item

**B. BIBLE, DARYL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2805 BARTRAM RD

City WINSTON SALEM	State NC	Zip Code 27106
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BB&T CORPORATION	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24026**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C. BIBLE, SHELLEY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2805 NARTRAM RD

City WINSTON SALEM	State NC	Zip Code 27106
-----------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24024**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BISHOP, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 628 WEST ROAD

City NEW CANAAN	State CT	Zip Code 06840
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IMPALA ASSET MANAGEMENT	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24256**

Amount of Each Receipt this Period  
50000.00

Memo Item

**B. BOGLE, GEORGE, E., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7301 N 16TH ST  
SUITE 201

City PHOENIX	State AZ	Zip Code 85020
-----------------	-------------	-------------------

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 ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24208**

Amount of Each Receipt this Period  
15000.00

Memo Item

**C. BONOMO, EDWARD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 WOODBINE TERRACE

City MORGANTON	State NC	Zip Code 28655
-------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24220**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	67700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BROWN, FLOYD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42111 N BACK CREEK CT  
 City ANTHEM State AZ Zip Code 85086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LIFTABLE MEDIA Occupation (for Individual) WRITER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2017  
**Transaction ID : SA11AI.24181**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**B. BROYHILL, JAMES, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 N HAWTHORNE ROAD  
 City WINSTON SALEM State NC Zip Code 27104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANVIL VENTURES LLP Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2017  
**Transaction ID : SA11AI.24118**  
 Amount of Each Receipt this Period  
 15000.00  
 Memo Item

**C. BRYAN, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 156 ELLERSLIE DR.  
 City FAYETTEVILLE State NC Zip Code 28303  
 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 ▼ 35000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2017  
**Transaction ID : SA11AI.24258**  
 Amount of Each Receipt this Period  
 35000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. BURKE, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7710 NORTH MERRIE LN

City FOX POINT	State WI	Zip Code 53217
-------------------	-------------	-------------------

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 ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23983**

Amount of Each Receipt this Period  
17500.00

Memo Item

**B. BURKE, KATHRYN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7710 NORTH MERRIE LANE

City MILWAUKEE	State WI	Zip Code 53217
-------------------	-------------	-------------------

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 ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23981**

Amount of Each Receipt this Period  
17500.00

Memo Item

**C. BURKE, KATHRYN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7710 NORTH MERRIE LANE

City MILWAUKEE	State WI	Zip Code 53217
-------------------	-------------	-------------------

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 ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23994**

Amount of Each Receipt this Period  
- 17500.00

Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CABANISS, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 SAUER AVENUE  
 City RICHMOND State VA Zip Code 23230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MCGUIRE WOODS, LLP Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24017**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**B. CABISADA, ROSE ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11116 SCHMIDT LANE  
 City MANOR State TX Zip Code 78653  
 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 ▼ 2700.00

Date of Receipt 08 / 21 / 2017  
**Transaction ID : SA11AI.23899**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. CAFFEY, CHRIS, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8749 W. MARKET STREET  
 City GREENSBORO State NC Zip Code 27409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) I. H. CAFFEY DISTRIBUTING COMPANY Occupation (for Individual) BEER WHOLESALER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 22 / 2017  
**Transaction ID : SA11AI.24126**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20400.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CALVERT, JONATHAN, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 MORNINGSIDE DR

City SAN ANTONIO	State TX	Zip Code 78209
---------------------	-------------	-------------------

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 ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24038**

Amount of Each Receipt this Period  
700.00

Memo Item

**B. CAMPBELL, MARY, M., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 OCEAN DRIVE

City CORPUS CHRISTI	State TX	Zip Code 78412
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARTEX ENERGY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24143**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. CATSIMATIDIS, JOHN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 817 FIFTH AVENUE

City NEW YORK	State NY	Zip Code 10065
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED REFINING CO.	Occupation (for Individual) CHAIRMAN & CEO
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24195**

Amount of Each Receipt this Period  
30000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	31700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CATSIMATIDIS, JOHN, , , JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 817 5TH AVE  
2

City NEW YORK State NY Zip Code 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED APPLE GROUP Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2017

**Transaction ID : SA11AI.24210**

Amount of Each Receipt this Period  
35000.00

Memo Item

**B. CATSIMATIDIS, MARGO, VONDERSAAR, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 817 FIFTH AVENUE

City NEW YORK State NY Zip Code 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED APPLE GROUP Occupation (for Individual) EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2017

**Transaction ID : SA11AI.24235**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. CAYRE, JOE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 FIFTH AVE, 2ND FL

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDTOWN EQUITIES Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
170000.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2017

**Transaction ID : SA11AI.24061**

Amount of Each Receipt this Period  
100000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CHASTEEN, CARLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13126 S. YORKTOWN AVE  
 City BIXBY State OK Zip Code 74008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ABS COMMUNICATIONS, INC. Occupation (for Individual) COMMUNICATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 30 / 2017  
**Transaction ID : SA11AI.23912**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. CHASTEEN, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13126 S. YORKTOWN AVE  
 City BIXBY State OK Zip Code 74008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ABS COMMUNICATIONS, INC. Occupation (for Individual) COMMUNICATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 30 / 2017  
**Transaction ID : SA11AI.23914**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. CHERA, STANLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 767 FIFTH AVENUE SUITE 2400  
 City NEW YORK State NY Zip Code 10153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROWN ACQUISITIONS Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 09 / 28 / 2017  
**Transaction ID : SA11AI.24255**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHERRY, JAMES, , ,**

Mailing Address 400 INDIAN TRAIL ROAD

City INDIAN TRAIL	State NC	Zip Code 28211
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAROLINA MADE INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24270**

Amount of Each Receipt this Period  
2700.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHERRY, LINA, , ,**

Mailing Address 400 INDIAN TRAIL ROAD

City INDIAN TRAIL	State NC	Zip Code 28079
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24268**

Amount of Each Receipt this Period  
2700.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHURCH, WILLIAM, , ,**

Mailing Address 3015 STURBRIDGE RD.

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) XPO LOGISTICS	Occupation (for Individual) VP OF OPERATIONS
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24260**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CLARK, JIMMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 776  
 City GREENSBORO State NC Zip Code 27417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GUY M. TURNER, INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24214**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item

**B. CLARK, KEVIN, J, CHIEF,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 447 TUSKARORA TR  
 City MOORESVILLE State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOORESVILLE, NC Occupation (for Individual) DEPUTY FIRE CHIEF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 11 / 2017  
**Transaction ID : SA11AI.23962**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. CLARK, WILLIAM, H., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3716 MAPLEWOOD AVENUE  
 City DALLAS State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHILANTHROPIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24040**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CLICK, JIM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6403 E. MIRAMAR DR.

City TUCSON	State AZ	Zip Code 85715
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM CLICK AUTOMOTIVE GROUP	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

**Transaction ID : SA11AI.24179**

Amount of Each Receipt this Period  
25000.00

Memo Item

**B. COCKMAN, TONYA, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 803 HOOD PL

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLEAR DEFENSE	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
37700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24275**

Amount of Each Receipt this Period  
37700.00

Memo Item

**C. COLTRANE, MICHAEL, R, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 FOREST CLIFF CT

City CONCORD	State NC	Zip Code 28025
-----------------	-------------	-------------------

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 ▼  
1000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24119**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	63700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. CRAPPS, VAN, L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5787 CR 531  
 City HONDO State TX Zip Code 78861  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24032**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. DAY, LARRY, L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1303 HORSE CREEK ROAD  
 City DUBOIS State WY Zip Code 82513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 29 / 2017  
**Transaction ID : SA11AI.24287**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

**C. DEJOY, LOUIS, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 806 COUNTRY CLUB DRIVE  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW BREED LOGISTICS Occupation (for Individual) C.E.O.  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt 09 / 29 / 2017  
**Transaction ID : SA11AI.24280**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	136000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. DELL, DEBBIE, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6760 TAFT ST

City HOLLYWOOD	State FL	Zip Code 33024
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEBBIE DELL INSURANCE AGCY INC	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24165**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. DICKERSON, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8333 DOUGLAS AVE., STE 1300 LB#72

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HANK DICKERSON & COMPANY	Occupation (for Individual) REAL ESTATE DEVELOPMENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2017

**Transaction ID : SA11AI.23900**

Amount of Each Receipt this Period  
5400.00

Memo Item

**C. DOLAN, CHARLES, F., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 CROSSWAYS PARK DRIVE

City WOODBURY	State NY	Zip Code 11797
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CABLEVISION	Occupation (for Individual) C.E.O.
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
62500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24248**

Amount of Each Receipt this Period  
62500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	69900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. DOLAN, HELEN, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 340 CROSSWAYS PARK RIVE  
 City WOODBURY State NY Zip Code 11797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 62500.00

Date of Receipt 09 / 28 / 2017  
**Transaction ID : SA11AI.24244**  
 Amount of Each Receipt this Period 62500.00  
 Memo Item

**B. DOLAN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 COVE NECK ROAD  
 City OYSTER BAY State NY Zip Code 11771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **MSG** Occupation (for Individual) **CHAIRMAN**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 09 / 28 / 2017  
**Transaction ID : SA11AI.24254**  
 Amount of Each Receipt this Period 125000.00  
 Memo Item

**C. DUNBAR, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3401 WILLOW GROVE CT  
 City GREENSBORO State NC Zip Code 27410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **BLUE RIDGE COMPANIES INC** Occupation (for Individual) **REAL ESTATE**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 14 / 2017  
**Transaction ID : SA11AI.23991**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. DUNBAR, CRYSTAL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3401 WILLOW GROVE CT  
 City GREENSBORO State NC Zip Code 27410  
 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 ▼ 2700.00

Date of Receipt **09 / 14 / 2017**  
**Transaction ID : SA11AI.23993**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. ELLIS, ROBERT, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6877 W. FRYE RD.  
 City CHANDLER State AZ Zip Code 85266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVAIR Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **08 / 18 / 2017**  
**Transaction ID : SA11AI.23892**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**C. ELLSWORTH, PATRICIA, F., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12543 N. FARMDALE ROAD  
 City MEQUON State WI Zip Code 53092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ELLSWORTH CORPORATION Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 19 / 2017**  
**Transaction ID : SA11AI.24073**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ELLSWORTH, PAUL, R., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12543 N FARMDALE ROAD

City MEQUON	State WI	Zip Code 53092
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELLSWORTH CORPORATION	Occupation (for Individual) CHIEF EXECUTIVE OFFICER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2017

**Transaction ID : SA11AI.24071**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. EPPERSON, NANCY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 WILL SCARLET RD

City WINSTON SALEM	State NC	Zip Code 27104
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PIEDMONT BAPTIST	Occupation (for Individual) PROFESSOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23989**

Amount of Each Receipt this Period  
7500.00

Memo Item

**C. EPPERSON, STUART, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 WILL SCARLET RD

City WINSTON SALEM	State NC	Zip Code 27104
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALEM COMMUNICATIONS CORPORATION	Occupation (for Individual) RADIO BROADCASTING
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23987**

Amount of Each Receipt this Period  
7500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ESHELMAN, FREDRIC, N, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 N. 3RD STREET  
SUITE 301

City WILMINGTON State NC Zip Code 28401

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHARMACEUTICAL PRODUCT DEVELOPMENT Occupation (for Individual) CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 07 / 2017  
**Transaction ID : SA11AI.23956**

Amount of Each Receipt this Period 100000.00

Memo Item

**B. ESTEY, RICHARD, C, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3051 ARABIAN ROAD

City LAS VEGAS State NV Zip Code 89107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NV RESTAURANT SERVICES Occupation (for Individual) MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 12 / 2017  
**Transaction ID : SA11AI.23973**

Amount of Each Receipt this Period 100000.00

Memo Item

**C. EVERETTE, ROYCE, E, , JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 ROBIN ROAD

City GREENVILLE State NC Zip Code 27858

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TIME INVESTMENT CORP. Occupation (for Individual) PRESIDENT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 11 / 2017  
**Transaction ID : SA11AI.23961**

Amount of Each Receipt this Period 35000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235000.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FAULKNER, ROBERT, F., MR.,**  
 Mailing Address 3800 FRY AVE  
 City TYLER State TX Zip Code 75701  
 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 09 / 15 / 2017  
**Transaction ID : SA11AI.24010**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FIELDS, ART, , ,**  
 Mailing Address 2210 ROSWELL AVENUE, UNIT 403  
 City CHARLOTTE State NC Zip Code 28207  
 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 ▼ 7500.00

Date of Receipt 09 / 19 / 2017  
**Transaction ID : SA11AI.24067**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FIELDS, JULIE, , ,**  
 Mailing Address 2210 ROSWELL AVENUE, UNIT 403  
 City CHARLOTTE State NC Zip Code 28207  
 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 ▼ 7500.00

Date of Receipt 09 / 19 / 2017  
**Transaction ID : SA11AI.24066**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. FRAINE, WILLIAM, G, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6761 FRIEDEN CHURCH ROAD

City GIBSONVILLE	State NC	Zip Code 27249
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) XPO LOGISTICS	Occupation (for Individual) COO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24002**

Amount of Each Receipt this Period  
10000.00

Memo Item

**B. FRANK, BARRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1852 BANKING ST #9275

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL PROTEINS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24121**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. FRANK, BARRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1852 BANKING ST #9275

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL PROTEINS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24166**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. FRIEDBERG, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 755 PARK AVENUE  
 City NEW YORK State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24213**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

**B. GANT, ALLEN, E., MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1022 W. DAVIS STREET  
 City BURLINGTON State NC Zip Code 27215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GLEN RAVEN, INC. Occupation (for Individual) TEXTILES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 28 / 2017  
**Transaction ID : SA11AI.24242**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**C. GAO, CHENG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 5TH AVENUE 39B  
 City NEW YORK State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DHARMA JOY ARTS & CULTURE LLC Occupation (for Individual) BUDDHIST ARTIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 12 / 2017  
**Transaction ID : SA11AI.23972**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150000.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. GARNER, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 600607

City DALLAS	State TX	Zip Code 75360
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARNER FINANCIAL	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2017

**Transaction ID : SA11AI.23917**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B. GIGLIO, VINCENT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16039 AGINCOURT DR

City HUNTERSVILLE	State NC	Zip Code 28078
----------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

**Transaction ID : SA11AI.24049**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C. GILL, KEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11937 SPRINGPOINT LANE

City CHARLOTTE	State NC	Zip Code 28278
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CPI SECURITY SYSTEMS	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24283**

Amount of Each Receipt this Period  
35000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40400.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. GILLAM, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3301 C ST #500

City ANCHORAGE	State AK	Zip Code 99503
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCKINLEY CAPITAL MANAGEMENT	Occupation (for Individual) FOUNDER & CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24030**

Amount of Each Receipt this Period  
50000.00

Memo Item

**B. GILLETTE, RON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 BROWNSTONE DRIVE

City MOORESVILLE	State NC	Zip Code 28117
---------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2017

**Transaction ID : SA11AI.23974**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C. GILLETTE, SHEREEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 BROWNSTONE DRIVE

City MOORESVILLE	State NC	Zip Code 28117
---------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2017

**Transaction ID : SA11AI.23975**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GILLMAN, THOMAS, , ,**

Mailing Address 42690 N 98TH PL

City SCOTTSDALE State AZ Zip Code 85262

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AUTOMOTIVE CAPITAL SERVICES Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2017

Transaction ID : SA11AI.24187

Amount of Each Receipt this Period  
15000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GLAZER, MAURICE, M., MR.,**

Mailing Address 13747 MONTFORT DR. 350

City DALLAS State TX Zip Code 75240

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLAZER FINANCIAL Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2017

Transaction ID : SA11AI.23927

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GOLDMAN, LLOYD, , ,**

Mailing Address 417 FIFTH AVE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLDG MANAGEMENT CO INC Occupation (for Individual) PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017

Transaction ID : SA11AI.24150

Amount of Each Receipt this Period  
35000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. GRIFFIN, DAVID, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5395 RIVER RD

City JAMESTOWN	State NC	Zip Code 27282
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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 ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24028**

Amount of Each Receipt this Period  
5400.00

Memo Item

**B. GUMOWITZ, ARNOLD, S, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 7TH AVE

City NEW YORK	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
70000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24249**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. HAIGNEY, DANIEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 124 BROWNSTONE DR

City MOORESVILLE	State NC	Zip Code 28117
---------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24016**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	43100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. HAIGNEY, RAYMOND, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19605 MADDY LN  
 City DAVIDSON State NC Zip Code 28036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **09 / 13 / 2017**  
**Transaction ID : SA11AI.23977**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. HALEY, MICHAEL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12121 W END  
 City NORTH PALM BEACH State FL Zip Code 33408-2942  
 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 ▼ 15000.00

Date of Receipt **09 / 18 / 2017**  
**Transaction ID : SA11AI.24055**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**C. HENDRICKS, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3035 FAIRHAVEN RIDGE  
 City KENNESAW State GA Zip Code 30144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) XPO Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 18 / 2017**  
**Transaction ID : SA11AI.24056**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	19700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. HENDRICKS, KIMBERLEE, K., MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2353 NORTH PARKER DRIVE  
 City JANESVILLE State WI Zip Code 53545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ABC SUPPLY CO. Occupation (for Individual) MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 22 / 2017  
**Transaction ID : SA11AI.24124**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

**B. HOGE, BRETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 121 GRASSLANDS CT  
 City ADVANCE State NC Zip Code 27006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BBT SCOTT STRINGFELLOW Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24218**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. HOGGARD, FAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3307 WALDRON DR.  
 City GREENSBORO State NC Zip Code 27408  
 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 ▼ 4000.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24207**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. HOWARD, KATHLEEN, S, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 CHESTERWOOD CT  
 City MOORESVILLE State NC Zip Code 28117  
 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 ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2017  
**Transaction ID : SA11AI.24018**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. HOWARD, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 CHESTERWOOD CT  
 City CHESTERWOOD CT State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IOMAX USA Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2017  
**Transaction ID : SA11AI.24020**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. HOYLE, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 SUNFISH POINT  
 City GREENSBORO State NC Zip Code 27455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COMPASS FINANCIAL PARTNERS LLC Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2017  
**Transaction ID : SA11AI.24262**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. HUBBARD, JOAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 LL DAVIS DR

City RUIDOSO	State NV	Zip Code 88345
-----------------	-------------	-------------------

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 ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

**Transaction ID : SA11AI.24183**

Amount of Each Receipt this Period  
50000.00

Memo Item

**B. HUBBARD, RANDALL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 LL DAVIS DR

City RUIDOSO	State NM	Zip Code 88345
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R.D. HUBBARD ENTERPRISES	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

**Transaction ID : SA11AI.24185**

Amount of Each Receipt this Period  
50000.00

Memo Item

**C. HUNT, DENNIS, C, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3724 SPANISH PEAK DR  
APT 2D

City HIGH POINT	State NC	Zip Code 27265
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) XPO LOGISTICS	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

**Transaction ID : SA11AI.24043**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 40 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. JACKSON, DANIEL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3912 DOVER PARK ROAD  
 City GREENSBORO State NC Zip Code 27407  
 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 ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2017  
**Transaction ID : SA11AI.24132**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**B. JACKSON, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 335 FIELDS DRIVE  
 City ABERDEEN State NC Zip Code 28315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) QUALITY BUILT HOMES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24152**  
 Amount of Each Receipt this Period  
 35000.00  
 Memo Item

**C. JACKSON, SUZI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3912 DOVER PARK RD  
 City GREENSBORO State NC Zip Code 27407  
 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 ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2017  
**Transaction ID : SA11AI.24134**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39000.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JEMAL, LAWRENCE, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2017
Mailing Address 1385 BROADWAY 16TH FLOOR		<b>Transaction ID : SA11AI.24233</b>
City NEW YORK	State NY	Zip Code 10018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) ICER BRANDS SERVICES	Occupation (for Individual) BUSINESS OWNER	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. KAHN, MICHAEL, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2017
Mailing Address 8371 PROVIDENCE RD		<b>Transaction ID : SA11AI.23959</b>
City CHARLOTTE	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) EMPIRE DIST.	Occupation (for Individual) WINE WHOLESALER	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KAHN, WENDY, , MRS.,</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2017
Mailing Address 13833 CAROWINDS BLVD.		<b>Transaction ID : SA11AI.23957</b>
City CHARLOTTE	State NC	Zip Code 28273
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 60000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. KASOWITZ, LORI, A, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1160 PARK AVENUE

City NEW YORK	State NY	Zip Code 10128
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24250**

Amount of Each Receipt this Period  
50000.00

Memo Item

**B. KASOWITZ, MARC, E, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1160 PARK AVENUE

City NEW YORK	State NY	Zip Code 10128
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KASOWITZ, BENSON, TORRES & FRIEDMAN LL	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24246**

Amount of Each Receipt this Period  
50000.00

Memo Item

**C. KELLY, KATHLEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 SUNFISH POINT

City GREENSBORO	State NC	Zip Code 27455
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPASS FINANCIAL PARTNERS	Occupation (for Individual) MANAGING PARTNERS
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24264**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KELLY, STAN, , ,**

Mailing Address 416 GALLIMORE DAIRY RD

City GREENSBORO	State NC	Zip Code 27409
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PIEDMONT TRIAD PARTNERSHIP	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2017

**Transaction ID : SA11AI.24105**

Amount of Each Receipt this Period  
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KEMMERER, JOHN, L., MR.,**

Mailing Address P.O. BOX 6848

City JACKSON	State WY	Zip Code 83002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACKSON HOLE MOUNTAIN RESORT	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24099**

Amount of Each Receipt this Period  
100000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KING, ROBERT, S., MR.,**

Mailing Address 5115 NEW CENTRE DRIVE

City WILMINGTON	State NC	Zip Code 28403
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOB KING AUTOMALL	Occupation (for Individual) NEW CAR DEALER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

**Transaction ID : SA11AI.24065**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. KLEINMAN, PHILLIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 CARLISLE ROAD  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PREMIER STORES INC. Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 43100.00

Date of Receipt **09 / 28 / 2017**  
**Transaction ID : SA11AI.24266**  
 Amount of Each Receipt this Period 43100.00  
 Memo Item

**B. KUBLY, MICHAEL, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8245 N RANGE LINE RD  
 City MILWAUKEE State WI Zip Code 53217  
 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 ▼ 10000.00

Date of Receipt **09 / 29 / 2017**  
**Transaction ID : SA11AI.24281**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. LAMON, JAMES, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9222 N FIRERIDGE TRL  
 City FOUNTAIN HILLS State AZ Zip Code 85268  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DEPCOM POWER Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **09 / 29 / 2017**  
**Transaction ID : SA11AI.24276**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	58500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LANE, ZHAOLI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 DOVER ROAD  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2017  
**Transaction ID : SA11AI.24123**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**B. LEBOW, BENNETT, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 667 MADISON AVENUE  
 City NEW YORK State NY Zip Code 10065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BSL CAPITAL Occupation (for Individual) INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 135000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2017  
**Transaction ID : SA11AI.24251**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item

**C. LEFRAK, HARRISON, TUCKER, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 97-77 QUEENS BOULEVARD  
 City REGO PARK State NY Zip Code 11374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LE FRAK ORG. Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24146**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	152000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LEFRAK, HARRISON, TUCKER, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 97-77 QUEENS BOULEVARD

City REGO PARK	State NY	Zip Code 11374
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LE FRAK ORG.		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Date of Receipt  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24147**

Amount of Each Receipt this Period  
 50000.00

Memo Item

**B. LEFRAK, JAMES, T., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 WEST 57TH STREET

City NEW YORK	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LEFRAK ORGANIZATION		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Date of Receipt  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24163**

Amount of Each Receipt this Period  
 100000.00

Memo Item

**C. LEFRAK, RICHARD, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 WEST 57TH STREET

City NEW YORK	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) THE LEFRAK ORGANIZATION		Occupation (for Individual) CHAIRMAN & C.E.O.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 100000.00	

Date of Receipt  
 09 / 27 / 2017  
**Transaction ID : SA11AI.24202**

Amount of Each Receipt this Period  
 100000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LENZ, DAVID, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 620994

City MIDDLETON	State WI	Zip Code 53562
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE NORTH CENTRAL GROUP	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2017

**Transaction ID : SA11AI.23979**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B. LIN, RICHARD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3730 W CENTURY BLVD #6

City INGLEWOOD	State CA	Zip Code 90303
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANSWORLD AQUATIC	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2017

**Transaction ID : SA11AI.23888**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. LONDEN, PRISCILLA, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 BILTMORE EST DR

City PHOENIX	State AZ	Zip Code 85016
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE LONDEN COMPANIES	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2017

**Transaction ID : SA11AI.23893**

Amount of Each Receipt this Period  
25000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LORBER, HOWARD, M, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 712 FIFTH AVENUE  
FL 52

City NEW YORK	State NY	Zip Code 10019
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VECTOR GROUP LIMITED	Occupation (for Individual) PRESIDENT/CEO
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2017

**Transaction ID : SA11AI.23916**

Amount of Each Receipt this Period  
35000.00

Memo Item

**B. LORIA, JEFFREY, H., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 EAST 72ND STREET

City NEW YORK	State NY	Zip Code 10021
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFFREY H. LORIA & CO., INC.	Occupation (for Individual) ART DEALER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24148**

Amount of Each Receipt this Period  
100000.00

Memo Item

**C. LOVE, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 536 W WILLOWBROOK DR

City BURLINGTON	State NC	Zip Code 27215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W. E. LOVE	Occupation (for Individual) INSURANCE
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

**Transaction ID : SA11AI.24191**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	137700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LOVE, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 536 W WILLOWBROOK DR  
 City BURLINGTON State NC Zip Code 27216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) W. E. LOVE Occupation (for Individual) POLICY ADMINISTRATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **09 / 26 / 2017**  
**Transaction ID : SA11AI.24189**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. MACK, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 369 MONTIBELLO DR  
 City MOORESVILLE State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ELEVATION REAL ESTATE Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **09 / 18 / 2017**  
**Transaction ID : SA11AI.24047**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. MAHONEY, P., MICHAEL, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9731 HILLTOP LANE  
 City MEQUON State WI Zip Code 53092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BANK MANAGER CORP. Occupation (for Individual) BANKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 28 / 2017**  
**Transaction ID : SA11AI.23908**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MARION, ANNE, W., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 CHERRY STREET  
UNIT 9

City FORT WORTH State TX Zip Code 76102

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL, GAS, RANCHERS, INVESTMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 06 / 2017  
**Transaction ID : SA11AI.23939**

Amount of Each Receipt this Period 50000.00

Memo Item

**B. MARTIN, PRISCILLA, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 91588

City ARLINGTON State TX Zip Code 76015

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24036**

Amount of Each Receipt this Period 5400.00

Memo Item

**C. MASTROIANNI, NICHOLAS, A., MR., II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 CALL LILLY CT

City PALM BEACH GARDENS State FL Zip Code 33418

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERGER SINGERMAN Occupation (for Individual) ATTORNEY

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2017  
**Transaction ID : SA11AI.23920**

Amount of Each Receipt this Period 50000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MASTROIANNI, NICHOLAS, A., MR., II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 CALL LILLY CT

City PALM BEACH GARDENS	State FL	Zip Code 33418
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERGER SINGERMAN	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24211**

Amount of Each Receipt this Period  
100000.00

Memo Item

**B. MATHEWSON, CHARLES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6448

City RENO	State NV	Zip Code 89513
--------------	-------------	-------------------

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 ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24252**

Amount of Each Receipt this Period  
50000.00

Memo Item

**C. MATHEWSON, STACIE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6448

City RENO	State NV	Zip Code 89513
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANSFORMING YOUTH RECOVERY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24253**

Amount of Each Receipt this Period  
50000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MATTHEWS, RONNIE, E., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 SADDLEBROOK LANE  
 City TOMBALL State TX Zip Code 77375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24014**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MAXWELL, THOMAS, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 BARKADA ROAD  
 City MONTICELLO State AR Zip Code 71655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAXWELL HARDWOOD Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24042**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. MCCLELLAN, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7103 LENTZ CT  
 City SUMMERFIELD State NC Zip Code 27358  
 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 ▼ 2000.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.24115**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 2750.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MCCLELLAN, MARIE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 N. RIDGE DRIVE

City WACO	State TX	Zip Code 76710
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARIE MCCLELLAN	Occupation (for Individual) SMALL BUSINESS OWNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2017

**Transaction ID : SA11AI.23910**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. MCGUIRE, DANIEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 SADDLE RD

City STONY BROOK	State NY	Zip Code 11790
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CWG	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

**Transaction ID : SA11AI.23985**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. MCNEELY, CONNOR, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1908 PIEDMONT HILLS PLACE, UNIT 81

City CHARLOTTE	State NC	Zip Code 28217
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE VANGUARD GROUP	Occupation (for Individual) HIGH NET WORTH RELATIONSHIP M
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

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

**Transaction ID : SA11AI.24137**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MELTZER, BRADLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11116 SCHMIDT LANE  
 City MANOR State TX Zip Code 78653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WESTHEIMER REGENCY Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **08 / 21 / 2017**  
**Transaction ID : SA11AI.23897**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. MELVIN, EDWIN, S, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 WILLOUGHBY BLVD  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOSEPH M BRYAN FOUNDATION Occupation (for Individual) FOUNDATION EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 07 / 2017**  
**Transaction ID : SA11AI.23958**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. MENDOLIA, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 QUINCY CT  
 City MOORESVILLE State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RENNOVA HEALTH Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **09 / 25 / 2017**  
**Transaction ID : SA11AI.24171**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MINCHER, BRAUN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2649 EAST MULBERRY STREET, SUITE 1

City FORT COLLINS	State CO	Zip Code 80524
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24227**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. MOILES, STUART, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12622 OLD WICK ROAD

City SAN ANTONIO	State TX	Zip Code 78230
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE INVESTORS
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24139**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. MONCRIEF, W., A, MR., JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 COMMERCE ST

City FORT WORTH	State TX	Zip Code 76102-5418
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INDEPENDENT OIL AND GAS PRODU
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2017

**Transaction ID : SA11AI.23915**

Amount of Each Receipt this Period  
50000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	53000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 56 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MORGAN, LESLIE, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1008 CHATFIELD DRIVE  
 City GREENSBORO State NC Zip Code 27410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2017  
**Transaction ID : SA11AI.24231**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. MORGAN, RICHARD, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1008 CHATFIELD DRIVE  
 City GREENSBORO State NC Zip Code 27410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRONE BRAND ENERGY, INC. Occupation (for Individual) CHIEF FINANCIAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2017  
**Transaction ID : SA11AI.24229**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. MORSE, ELEANOR, FISHER, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 11052  
 City MIDLAND State TX Zip Code 79702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE INVESTMENTS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2017  
**Transaction ID : SA11AI.23929**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5900.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. MYRICK, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 22288  
 City HOUSTON State TX Zip Code 77227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CONCORD EXPLORATION Occupation (for Individual) OIL & GAS EXPLORATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **08 / 17 / 2017**  
**Transaction ID : SA11AI.23890**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item

**B. NELIN, MICHAEL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 253 MILFORD CIRCLE  
 City MOORESVILLE State NC Zip Code 28117  
 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 ▼ 2700.00

Date of Receipt **09 / 25 / 2017**  
**Transaction ID : SA11AI.24151**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. NELSON, TODD, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 590  
 City WISCONSIN DELLS State WI Zip Code 53965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KALAHARI RESORTS Occupation (for Individual) PRESIDENT & OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt **09 / 05 / 2017**  
**Transaction ID : SA11AI.23921**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	43100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. NORRIS, JULIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6351 COTTONWOOD SHORES DRIVE  
 City WELLINGTON State CO Zip Code 80549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Poudre School District Occupation (for Individual) NURSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24226**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. NORRIS, ZACHARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6351 COTTONWOOD SHORES DRIVE  
 City WELLINGTON State CO Zip Code 80549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STUDENT Occupation (for Individual) STUDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2017  
**Transaction ID : SA11AI.24224**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. NUNN, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 KELLY RD  
 City APEX State NC Zip Code 27523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) D&H SUPPORT SOLUTIONS Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 12 / 2017  
**Transaction ID : SA11AI.23968**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 9500.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. NUNN, HAROLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 KELLY RD  
 City APEX State NC Zip Code 27523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PEAK RESOURCES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2017  
**Transaction ID : SA11AI.23966**  
 Amount of Each Receipt this Period  
 7500.00  
 Memo Item

**B. PAINTER, DEAN, E, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4601 SIX FORKS ROAD STE 528  
 City RALEIGH State NC Zip Code 27609-5285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RAVEN CAPITAL INC. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2017  
**Transaction ID : SA11AI.24077**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. PAINTER, LISA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4601 SIX FORKS RD  
 City RALEIGH State NC Zip Code 27609  
 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 ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2017  
**Transaction ID : SA11AI.24076**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PALMER, GEOFFREY, H, MR.,**

Mailing Address 270 N. CANON DRIVE

City BEVERLY HILLS	State CA	Zip Code 90210
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) G. H. PALMER ASSOCIATES	Occupation (for Individual) REAL ESTATE DEVELOPER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24089**

Amount of Each Receipt this Period  
100000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PARKER, DAVID, F., MR.,**

Mailing Address 1608 SAINT ANDREWS ROAD

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24197**

Amount of Each Receipt this Period  
2000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PERELMAN, RONALD, O., MR.,**

Mailing Address 767 5TH AVENUE

City NEW YORK	State NY	Zip Code 10153
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REVLON GROUP, INCORPORATED	Occupation (for Individual) CHAIRMAN & C. E. O.
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24194**

Amount of Each Receipt this Period  
125000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	227000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. PETERFFY, THOMAS, P., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1255 S. OCEAN BLVD.

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERACTIVE BROKERS GROUP	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2017

**Transaction ID : SA11AI.23964**

Amount of Each Receipt this Period  
250000.00

Memo Item

**B. PETERS, LENNY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 FOREST HILL DR

City HIGH POINT	State NC	Zip Code 27262
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PMR	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
70000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

**Transaction ID : SA11AI.23960**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. POND, KAREN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GRAYLYN PL

City WINSTON SALEM	State NC	Zip Code 27106
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN HOME FURNISHINGS HALL OF FAME	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24173**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	287700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. POND, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 GRAYLYN PLACE  
 City WINSTON SALEM State NC Zip Code 27106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE EDUCATION CENTER Occupation (for Individual) PUBLISHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24175**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. POTTER, G., L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8620-12 TWELVE OAKS DRIVE  
 City TEXAS CITY State TX Zip Code 77591  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2017  
**Transaction ID : SA11AI.24008**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. POWELL, ASHLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 10207  
 City GREENSBORO State NC Zip Code 27404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2017  
**Transaction ID : SA11AI.24274**  
 Amount of Each Receipt this Period  
 5400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. PURCELL, PATRICIA, W., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 S. WASHINGTON STREET

City HINSDALE	State IL	Zip Code 60521
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2017

**Transaction ID : SA11AI.24001**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. PURCELL, PAUL, E., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 SOUTH WASHINGTON

City HINSDALE	State IL	Zip Code 60521
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROBERT W. BAIRD & COMPANY INC.	Occupation (for Individual) CHAIRMAN, PRESIDENT & C.E.O.
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2017

**Transaction ID : SA11AI.23997**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. RAGSDALE, GEORGE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 404 E MAIN ST

City JAMESTOWN	State NC	Zip Code 27282
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WELLS FARGO	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2017

**Transaction ID : SA11AI.24054**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. RANKIN, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2011 ST. ANDREWS ROAD  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARLISLE RESIDENTIAL PROPERTIES Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 09 / 13 / 2017  
**Transaction ID : SA11AI.23980**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item

**B. RAPP, ROBERT, C., MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2016 ST ANDREWS ROAD  
 City GREENSBORO State NC Zip Code 27408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24085**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. REED, ANNE, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4231 WINDSOR PARKWAY  
 City DALLAS State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INSURANCE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2017  
**Transaction ID : SA11AI.23935**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8600.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. REIMAN, ROBERTA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5350 SOUTH 60TH ST  
 City GREENDALE State WI Zip Code 53129  
 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 ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2017  
**Transaction ID : SA11AI.23942**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. REIMAN, ROY, J., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 WEST WISCONSIN AVENUE SUITE 200  
 City PEWAUKEE State WI Zip Code 53072  
 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 ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2017  
**Transaction ID : SA11AI.23940**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. RILEY, DOUG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 N. SCOTTSDALE ROAD  
 City SCOTTSDALE State AZ Zip Code 85251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DOUG RILEY ENTERPRISES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2017  
**Transaction ID : SA11AI.24279**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ROBERTS, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15215 N KIERLAND BLVD UNIT 305

City SCOTTSDALE	State AZ	Zip Code 85254
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAS ROBERTS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2017

**Transaction ID : SA11AI.24237**

Amount of Each Receipt this Period  
10800.00

Memo Item

**B. ROBSON, EDWARD, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9532 E RIGGS ROAD

City SUN LAKES	State AZ	Zip Code 08528
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROBSON COMMUNITIES	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2017

**Transaction ID : SA11AI.23909**

Amount of Each Receipt this Period  
25000.00

Memo Item

**C. RUFFIN, PHILLIP, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7030 TOMIYASU LN

City LAS VEGAS	State NV	Zip Code 89120
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RUFFIN ACQUISITION LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
95400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2017

**Transaction ID : SA11AI.23950**

Amount of Each Receipt this Period  
95400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	131200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 67 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SACACIU, TEODOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13571 NEEDHAM PLACE  
 City WILLIS State TX Zip Code 77318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PASTOR & BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 20 / 2017  
**Transaction ID : SA11AI.23895**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. SAUL, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 MAPLE AVE  
 City KATONAH State NY Zip Code 10536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAUL PARTNERS LP Occupation (for Individual) PRIVATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 25 / 2017  
**Transaction ID : SA11AI.24156**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**C. SAUL, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 MAPLE AVE  
 City KATONAH State NY Zip Code 10536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DWIGHT SCHOOL Occupation (for Individual) TEACHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 25 / 2017  
**Transaction ID : SA11AI.24154**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 102700.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SCHMITZ, MICHAEL, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 E. JUNIPER COURT

City MEQUON	State WI	Zip Code 53092
----------------	-------------	-------------------

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 ▼  
2000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24141**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. SCHUEMANN, MARGARET, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1950 WEST DEAN ROAD

City RIVER HILLS	State WI	Zip Code 53217
---------------------	-------------	-------------------

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 ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

**Transaction ID : SA11AI.24192**

Amount of Each Receipt this Period  
5400.00

Memo Item

**C. SCHULD, MARGARET, M, MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18203 N GARDENVIEW DR

City SUN CITY WEST	State AZ	Zip Code 85375
-----------------------	-------------	-------------------

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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2017

**Transaction ID : SA11AI.23891**

Amount of Each Receipt this Period  
25000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	32400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SCHUSTER, LEO, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1012 BROADMOOR DRIVE  
 City EL PASO State TX Zip Code 79912  
 Date of Receipt 09 / 06 / 2017  
 Transaction ID : SA11AI.23931  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

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 ▼ 1000.00

**B. SCHWARTZ, DONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 THIRD AVE  
 City NEW YORK State NY Zip Code 10158  
 Date of Receipt 09 / 18 / 2017  
 Transaction ID : SA11AI.24060  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

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 ▼ 50000.00

**C. SCHWARTZ, MARVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 THIRD AVE  
 City NEW YORK State NY Zip Code 10158  
 Date of Receipt 09 / 18 / 2017  
 Transaction ID : SA11AI.24058  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) NEUBERGER BERMAN LLC Occupation (for Individual) INVESTMENT ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 101000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SIEGEL, JEANNE, S., MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 781 5TH AVE

City NEW YORK	State NY	Zip Code 10022
------------------	-------------	-------------------

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 ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2017

**Transaction ID : SA11AI.24074**

Amount of Each Receipt this Period  
250000.00

Memo Item

**B. SIMPSON, SAM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1915 GRANVILLE ROAD

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMPSON COMMERCIAL REAL ESTATE	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24222**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C. SLECHTA, AMANDA, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1908 PIEDMONT HILLS PLACE, UNIT 81

City CHARLOTTE	State NC	Zip Code 28217
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE VANGUARD GROUP	Occupation (for Individual) HIGH NET WORTH RELATIONSHIP M
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

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

**Transaction ID : SA11AI.24130**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SMITH, WILLIAM, H., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 SUNSET DRIVE

City GREENSBORO State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRUST COMPANY OF THE SOUTH Occupation (for Individual) WEALTH MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 15 / 2017  
**Transaction ID : SA11AI.24004**

Amount of Each Receipt this Period 2700.00

Memo Item

**B. SNIEGON, VIRGINIA, A, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5901 MOUNT EAGLE DRIVE APT 1402

City ALEXANDRIA State VA Zip Code 22303-2511

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INSTITUTE FOR DEFENSE ANALYSES Occupation (for Individual) NATIONAL DEFENSE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 07 / 05 / 2017  
**Transaction ID : SA11AI.23886**

Amount of Each Receipt this Period 35000.00

Memo Item

**C. STANCIL, GAYLE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 HOLLY SPRINGS LN

City GREENSBORO State NC Zip Code 27455

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 ▼ 2000.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24081**

Amount of Each Receipt this Period 2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. STARR, FREDERICK, B., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5506 E. ROCKINGHAM ROAD

City GREENSBORO	State NC	Zip Code 27407
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATUZZI AMERICAS	Occupation (for Individual) PRESIDENT & C.E.O.
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24160**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. STARR, FREDERICK, B., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5506 E. ROCKINGHAM ROAD

City GREENSBORO	State NC	Zip Code 27407
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATUZZI AMERICAS	Occupation (for Individual) PRESIDENT & C.E.O.
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24245**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. STARR, SUE, ZOOK, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5506 E. ROCKINGHAM ROAD

City GREENSBORO	State NC	Zip Code 27407
--------------------	-------------	-------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

**Transaction ID : SA11AI.24158**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. STARR, SUE, ZOOK, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5506 E. ROCKINGHAM ROAD

City GREENSBORO	State NC	Zip Code 27407
--------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

**Transaction ID : SA11AI.24240**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. STONER, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5152 BLAER PARKWAY

City DUBLIN	State OH	Zip Code 43017
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) DDS
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24216**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C. TARWATER, ANN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2301 QUEENS ROAD EAST

City CHARLOTTE	State NC	Zip Code 28207
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.23995**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. TARWATER, MICHAEL, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 QUEENS ROAD EAST

City CHARLOTTE	State NC	Zip Code 28207
-------------------	-------------	-------------------

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 ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.23999**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B. THOMPSON, BRAD, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6176 OLD IRONWORKS ROAD

City GREENSBORO	State NC	Zip Code 27455
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLUMBIA FOREST PRODUCTS	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24097**

Amount of Each Receipt this Period  
17500.00

Memo Item

**C. THOMPSON, ELIZABETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6176 OLD IRONWORKS ROAD

City GREENSBORO	State NC	Zip Code 27455
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHERN VIRGINIA MENTAL HEALTH	Occupation (for Individual) DIETITIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24095**

Amount of Each Receipt this Period  
17500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	37700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. UHL, JOHN, J., MR.,**

Mailing Address 245 FAIRFIELD AVE

City GRETNA	State LA	Zip Code 70056
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLO DETTA, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

**Transaction ID : SA11AI.24006**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VALITUTTO, RICHARD, , ,**

Mailing Address 31 KEMP RD E

City GREENSBORO	State NC	Zip Code 27410
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW BREED INC	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24272**

Amount of Each Receipt this Period  
2000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. VELDE, WILLIAM, KENT, MR.,**

Mailing Address 3424 N SHEPARD AVE

City MILWAUKEE	State WI	Zip Code 53211
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAKEVIEW EQUITY PARTNERS LLC	Occupation (for Individual) PRIVATE EQUITY
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

**Transaction ID : SA11AI.23923**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4950.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. VIRTUE, TED, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 PARK DRIVE SOUTH

City RYE	State NY	Zip Code 10580
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDOCEAN PARTNERS	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24205**

Amount of Each Receipt this Period  
35000.00

Memo Item

**B. WADLEY, IRENE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9695 KING RD

City LOOMIS	State CA	Zip Code 95650
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIER CREEK PAIN AND SPINE	Occupation (for Individual) TREASURER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2017

**Transaction ID : SA11AI.23970**

Amount of Each Receipt this Period  
17500.00

Memo Item

**C. WADLEY, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10308 LOBLEY HILL LANE

City RALEIGH	State NC	Zip Code 27613
-----------------	-------------	-------------------

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 ▼  
17500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2017

**Transaction ID : SA11AI.23971**

Amount of Each Receipt this Period  
17500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WANEK, JOYCE, A., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 417 KING ST

City ARCADIA	State WI	Zip Code 54612
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24103**

Amount of Each Receipt this Period  
35000.00

Memo Item

**B. WANEK, RONALD, G., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 417 KING STREET

City ARCADIA	State WI	Zip Code 54612
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASHLEY FURNITURE	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24101**

Amount of Each Receipt this Period  
35000.00

Memo Item

**C. WEI, JIA HUI, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1842 8TH ST

City MANHATTAN BEACH	State CA	Zip Code 90266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALL MARINE INC	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

**Transaction ID : SA11AI.23885**

Amount of Each Receipt this Period  
- 35000.00

Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WHITAKER, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 GRAYLYN PLACE

City WINSTON SALEM	State NC	Zip Code 27106
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INV	Occupation (for Individual) VENTURE CAPITAL
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2017

**Transaction ID : SA11AI.24068**

Amount of Each Receipt this Period  

35000.00
----------

 Memo Item

**B. WIELAND, BRUCE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 PISGAH CHURCH RD PME 201

City GREENSBORO	State NC	Zip Code 27455
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUPPLEMENTAL SOFTWARE	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

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

**Transaction ID : SA11AI.24135**

Amount of Each Receipt this Period  

2000.00
---------

 Memo Item

**C. WIELAND, JACQUELINE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5010 WARM SPRINGS PT

City GREENSBORO	State NC	Zip Code 27455
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STIFEL	Occupation (for Individual) VP
---	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

**Transaction ID : SA11AI.24079**

Amount of Each Receipt this Period  

2000.00
---------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	39000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 79 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WILSON, PAUL, J., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 LIGHTSHIP DR  
 City MOORESVILLE    State NC    Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVP BIOLOGICALS    Occupation (for Individual) CEO  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24086**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

**B. WILSON, ROBIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 LIGHTSHIP DRIVE  
 City MOORESVILLE    State NC    Zip Code 28117  
 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 ▼ 7500.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24088**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

**C. WINDSOR, LEIGHSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2506 BERKLEY PL  
 City GREENSBORO    State NC    Zip Code 27403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 20 / 2017  
**Transaction ID : SA11AI.24083**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

35000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WITKOFF, STEVEN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 WEST 57TH STREET

City NEW YORK	State NY	Zip Code 10019
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WITKOFF GROUP	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
94400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

**Transaction ID : SA11AI.24203**

Amount of Each Receipt this Period  
94400.00

Memo Item

**B. WOLF, STEPHEN, B., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 268

City TYLER	State TX	Zip Code 75710
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2017

**Transaction ID : SA11AI.23944**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. WOOTEN, ANN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 847 HOLT DR

City RALEIGH	State NC	Zip Code 27608
-----------------	-------------	-------------------

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 ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

**Transaction ID : SA11AI.24278**

Amount of Each Receipt this Period  
35000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130400.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WRIGHT, ROBERT, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 734 SASCO HILL ROAD  
 City FAIRFIELD State CT Zip Code 06824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AUTISM SPEAKS Occupation (for Individual) CO-FOUNDER & DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 08 / 28 / 2017  
**Transaction ID : SA11AI.23904**  
 Amount of Each Receipt this Period 75000.00  
 Memo Item

**B. WURTSBAUGH, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7009 COPPERLEAF PL  
 City CARY State NC Zip Code 27519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEALTH-SCRIPTS MEDIA INC Occupation (for Individual) MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 17500.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.24109**  
 Amount of Each Receipt this Period 17500.00  
 Memo Item

**C. WURTSBAUGH, KARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7009 COPPERLEAF PLACE  
 City CARY State NC Zip Code 27519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEALTH-SCRIPTS MEDIA INC Occupation (for Individual) MARKETING  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 17500.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.24107**  
 Amount of Each Receipt this Period 17500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 110000.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. WYSCARVER, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6325 NESTING WAY  
 City OAK RIDGE State NC Zip Code 27310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CELGENE Occupation (for Individual) ONCOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 18 / 2017  
**Transaction ID : SA11AI.24051**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. YELIN, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1338  
 City CAREFREE State AZ Zip Code 85377  
 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 ▼ 1000.00

Date of Receipt 09 / 28 / 2017  
**Transaction ID : SA11AI.24239**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. YELIN, MONICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O BOX 1338  
 City CAREFREE State AZ Zip Code 85377  
 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 ▼ 1000.00

Date of Receipt 09 / 26 / 2017  
**Transaction ID : SA11AI.24177**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 4000.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ZARNEGIN, ADRIANNA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 N. BEVERLY DRIVE  
 SUITE 350

City BEVERLY HILLS State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 09 / 27 / 2017  
**Transaction ID : SA11AI.24201**

Amount of Each Receipt this Period  
 50000.00

Memo Item

**B. ZARNEGIN, ROBERT, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 N. BEVERLY DRIVE  
 SUITE 350

City BEVERLY HILLS State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PROBITY INTERNATIONAL CORP.** Occupation (for Individual) **REAL ESTATE DEVELOPER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 09 / 27 / 2017  
**Transaction ID : SA11AI.24199**

Amount of Each Receipt this Period  
 50000.00

Memo Item

**C. ZIETLOW, DONALD, P., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1626 OAK ST

City LA CROSSE State WI Zip Code 54603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KWIK TRIP, INC.** Occupation (for Individual) **CHAIRMAN OF THE BOARD**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 35000.00

Date of Receipt  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24167**

Amount of Each Receipt this Period  
 35000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. ZIETLOW, LAVONNE, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2802 BERGAMOT PLACE  
 City ONALASKA State WI Zip Code 54650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24161**  
 Amount of Each Receipt this Period  
 35000.00  
 Memo Item

**B. ZURAW, BENJAMIN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 SUNSET DRIVE  
 City GREENSBORO State NC Zip Code 27408  
 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 ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017  
**Transaction ID : SA11AI.24145**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	37000.00
<b>TOTAL</b> This Period (last page this line number only).....	5254450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 104
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. LENDINGTREE LLC POLITICAL ACTION COMMITTEE**

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

Mailing Address 11115 RUSHMORE DRIVE

City CHARLOTTE	State NC	Zip Code 28277
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00467381

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2017

**Transaction ID : SA11C.24285**

Amount of Each Receipt this Period  

35000.00
----------

 Memo Item

**B.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period  

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 Memo Item

**C.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period  

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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35000.00
<b>TOTAL</b> This Period (last page this line number only).....	35000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 OF 104  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AON RISK SERVICES, INC.**

Mailing Address **PREMIUM ACCOUNTING SERVICE CENTER**

City <b>OWINGS MILLS</b>	State <b>MD</b>	Zip Code <b>21117</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**415.00**

Date of Receipt  
**09 / 22 / 2017**

**Transaction ID : SA15.24289**

Amount of Each Receipt this Period  
**415.00**

Memo Item  
**VENDOR REFUND: INSURANCE**

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

Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_

Memo Item

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

Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>415.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>415.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. AON RISK SERVICES NORTHEAST, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2017

Mailing Address AON RISK SERVICES INC.  
P.O BOK 7247-7376

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
INSURANCE

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.24334**  
Amount of Each Disbursement this Period  
[ ] 5020.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. BLAKE BELCHER PHOTOGRAPHY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2017

Mailing Address 307 COMBS STREET

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.24319**  
Amount of Each Disbursement this Period  
[ ] 1500.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUEBONNET FUNDRAISING LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		18		2017

Mailing Address 3300 BEE CAVES ROAD #650-1151

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement  
FUNDRAISING CONSULTING

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.24302**  
Amount of Each Disbursement this Period  
[ ] 4356.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[ ] 10876.00
[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. CALI FAME**

Mailing Address 20934 SOUTH SANTA FE AVENUE

City  
CARSON

State  
CA

Zip Code  
90810

Purpose of Disbursement  
COLLATERAL: CAPS/DELIVERY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C  
**Transaction ID : SB21B.24290**  
Amount of Each Disbursement this Period  
613.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL FINANCE STRATEGIES, LLC**

Mailing Address 6695 OAKDOWN DRIVE

City  
TALLAHASSEE

State  
FL

Zip Code  
32309

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 18 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.24304**  
Amount of Each Disbursement this Period  
8103.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City  
TYSONS CORNER

State  
VA

Zip Code  
22182

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 11 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.24298**  
Amount of Each Disbursement this Period  
10000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

18717.26



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)  
**A. CMDI**

Date of Disbursement: MM / DD / YYYY  
08 / 08 / 2017

Mailing Address: 1593 SPRING HILL RD  
SUITE 400

City: TYSONS CORNER      State: VA      Zip Code: 22182

Purpose of Disbursement: DATA MANAGEMENT SERVICES

Candidate Name: \_\_\_\_\_

Office Sought:  House      Disbursement For:  Primary       General  
 Senate       Other (specify) ▼  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.24320**  
Amount of Each Disbursement this Period: 10000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CORT TRADE SHOW FURNISHINGS**

Date of Disbursement: MM / DD / YYYY  
07 / 18 / 2017

Mailing Address: 3455 W SUNSET RD  
STE A

City: LAS VEGAS      State: NV      Zip Code: 89118

Purpose of Disbursement: EVENT EXPENSE: FURNITURE RENTAL

Candidate Name: \_\_\_\_\_

Office Sought:  House      Disbursement For:  Primary       General  
 Senate       Other (specify) ▼  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.24306**  
Amount of Each Disbursement this Period: 2044.78

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CURTIS DIEMER PHOTOGRAPHY**

Date of Disbursement: MM / DD / YYYY  
07 / 07 / 2017

Mailing Address: 105 PECOS ST

City: LYNCHBURG      State: VA      Zip Code: 24502

Purpose of Disbursement: PHOTOGRAPHY SERVICES

Candidate Name: \_\_\_\_\_

Office Sought:  House      Disbursement For:  Primary       General  
 Senate       Other (specify) ▼  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.24292**  
Amount of Each Disbursement this Period: 800.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12844.78

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. DOUG COULTER PHOTOGRAPHY**

Mailing Address 1415 HORSESHOE CREEK LANE

City CUMMING State GA Zip Code 30041

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24345**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DOUG COULTER PHOTOGRAPHY**

Mailing Address 1415 HORSESHOE CREEK LANE

City CUMMING State GA Zip Code 30041

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24346**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FASTSIGNS**

Mailing Address 4101 MEXICO RD  
SUITE - C

City ST PETERS State MO Zip Code 63376

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24293**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24361**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FORWARD STRATEGIES**

Mailing Address 7222 ANHINGA FARMS ROAD

City TALLAHASSEE State FL Zip Code 32309

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24308**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FULL HOUSE EVENTS, LLC**

Mailing Address C/O BRANDI MARKS  
PO BOX 409

City OLDWICK State NJ Zip Code 08858

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24308**  
 Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. GRAND HYATT</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016
Mailing Address 109 EAST 42ND STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24363</b> Amount of Each Disbursement this Period [ ] 819.76
City NEW YORK	State NY	Zip Code 10017
Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GRIGSBY APPLGATE, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 2716 CALDER COURT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24310</b> Amount of Each Disbursement this Period [ ] 516.00
City FORT WORTH	State TX	Zip Code 76107
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GRIGSBY APPLGATE, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2017
Mailing Address 2716 CALDER COURT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24325</b> Amount of Each Disbursement this Period [ ] 3822.00
City FORT WORTH	State TX	Zip Code 76107
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4338.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. JONES DAY</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 51 LOUISIANA AVENUE, N.W.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24311</b> Amount of Each Disbursement this Period 19738.20
City WASHINGTON	State DC	Zip Code 20001-2113
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. JONES DAY</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2017
Mailing Address 51 LOUISIANA AVENUE, N.W.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24330</b> Amount of Each Disbursement this Period 2936.28
City WASHINGTON	State DC	Zip Code 20001-2113
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KIRSTIN HOPKINS INC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 6059 KENWOOD AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24312</b> Amount of Each Disbursement this Period 6144.00
City DALLAS	State TX	Zip Code 75205
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28818.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. PLUVIOUS GROUP LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 515 S. FIGEUROA STREET 16TH FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24313</b> Amount of Each Disbursement this Period [ ] 25508.00
City LOS ANGELES	State CA	Zip Code 90071
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. RARE LOVE PHOTOGRAPHY</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2017
Mailing Address 166 TIMBER RIDGE ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24295</b> Amount of Each Disbursement this Period [ ] 750.00
City HUMMELSTOWN	State PA	Zip Code 17036
Purpose of Disbursement PHOTOGRAPHY SERVICES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24314</b> Amount of Each Disbursement this Period [ ] 30344.69
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

56602.69

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2017
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24325</b> Amount of Each Disbursement this Period [ ] 30006.75
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2017
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24331</b> Amount of Each Disbursement this Period [ ] 30018.15
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017
Mailing Address 310 FIRST STREET SE		FEC Identification Number C C00003418 <b>Transaction ID : SB21B.24371</b> Amount of Each Disbursement this Period [ ] 169360.74
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement TRANSFER: FACILITY RENTAL & CATERING SERVICES REIMBURSEMENT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 229385.64
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. REVV LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2017
Mailing Address 1920 L STREET NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24300</b> Amount of Each Disbursement this Period 15100.00
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. REVV LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2017
Mailing Address 1920 L STREET NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24322</b> Amount of Each Disbursement this Period 350.00
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. REVV LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 13 / 2017
Mailing Address 1920 L STREET NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.24333</b> Amount of Each Disbursement this Period 702.10
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

16152.10

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

[REDACTED]



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

**A. SANDLER, BRYCE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 NORMANDY

City CLAWSON State MI Zip Code 48017

Purpose of Disbursement REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.24324

Amount of Each Disbursement this Period: 3312.40

Memo Item

**B. SANDLER, BRYCE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 NORMANDY

City CLAWSON State MI Zip Code 48017

Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: TRAVEL: MILEAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.24347

Amount of Each Disbursement this Period: 812.70

Memo Item

**C. SOFITEL NEW YORK**

Full Name (Last, First, Middle Initial)

Mailing Address 45 WEST 44TH STREET

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : SB21B.24355

Amount of Each Disbursement this Period: 435.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3312.40

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24299**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24321**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.24337**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. SULLIVAN ALVARADO, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017	
Mailing Address PO BOX 340069		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24316</b> Amount of Each Disbursement this Period [ ] 34560.00	
City AUSTIN	State TX	Zip Code 78734	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. THE MCINTOSH COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017	
Mailing Address 5310 HARVEST HILL ROAD SUITE 209		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24317</b> Amount of Each Disbursement this Period [ ] 9144.00	
City DALLAS	State TX	Zip Code 75230	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. THE MCINTOSH COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2017	
Mailing Address 5310 HARVEST HILL ROAD SUITE 209		FEC Identification Number C [ ] <b>Transaction ID : SB21B.24332</b> Amount of Each Disbursement this Period [ ] 6072.00	
City DALLAS	State TX	Zip Code 75230	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 49776.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. TRUMP SOHO**

Mailing Address 246 SPRING STREET

City NEW YORK State NY Zip Code 10013

Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: FACILITY RENTAL/CATERING SERVICES  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.24349  
Amount of Each Disbursement this Period  
886.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. TUCKER PHOTOGRAPHY, INC**

Mailing Address 300 DONELSON PIKE

City NASHVILLE State TN Zip Code 37214

Purpose of Disbursement PHOTOGRAPHY SERVICES  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.24297  
Amount of Each Disbursement this Period  
510.53

Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 1221 BOWERS ST

City BIRMINGHAM State MI Zip Code 48012-9998

Purpose of Disbursement REIMBURSEMENT [SB21B.24319]: POSTAGE  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.24356  
Amount of Each Disbursement this Period  
188.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

510.53  
507524.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial) <b>A. DONALD J. TRUMP FOR PRESIDENT, INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2017
Mailing Address 725 FIFTH AVENUE		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB22.24338</b> Amount of Each Disbursement this Period 273492.70
City NEW YORK	State NY	
Purpose of Disbursement TRANSFER OF NET PROCEEDS		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) <b>B. DONALD J. TRUMP FOR PRESIDENT, INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2017
Mailing Address 725 FIFTH AVENUE		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB22.24339</b> Amount of Each Disbursement this Period 230319.85
City NEW YORK	State NY	
Purpose of Disbursement TRANSFER OF NET PROCEEDS		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) <b>C. DONALD J. TRUMP FOR PRESIDENT, INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2017
Mailing Address 725 FIFTH AVENUE		FEC Identification Number <b>C</b> C00580100 <b>Transaction ID : SB22.24340</b> Amount of Each Disbursement this Period 318863.78
City NEW YORK	State NY	
Purpose of Disbursement TRANSFER OF NET PROCEEDS		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

822676.33

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. DONALD J. TRUMP FOR PRESIDENT, INC.**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2017

FEC Identification Number

**C** C00580100

**Transaction ID : SB22.24341**

Amount of Each Disbursement this Period

188407.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. DONALD J. TRUMP FOR PRESIDENT, INC.**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2017

FEC Identification Number

**C** C00580100

**Transaction ID : SB22.24343**

Amount of Each Disbursement this Period

44735.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. DONALD J. TRUMP FOR PRESIDENT, INC.**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2017

FEC Identification Number

**C** C00580100

**Transaction ID : SB22.24344**

Amount of Each Disbursement this Period

22766.83

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

255909.47

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2017

Mailing Address 310 FIRST STREET SE

FEC Identification Number

**C** C00003418

**Transaction ID : SB22.24326**

Amount of Each Disbursement this Period

79329.04

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - LEGAL PROCEEDINGS ACCOUNT

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2017

Mailing Address 310 FIRST STREET SE

FEC Identification Number

**C** C00003418

**Transaction ID : SB22.24327**

Amount of Each Disbursement this Period

166919.77

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - CONVENTION ACCOUNT

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2017

Mailing Address 310 FIRST STREET SE

FEC Identification Number

**C** C00003418

**Transaction ID : SB22.24328**

Amount of Each Disbursement this Period

171472.13

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - HEADQUARTERS ACCOUNT

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

417720.94

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**TRUMP VICTORY**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - HEADQUARTERS ACCOUNT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2017

FEC Identification Number: C00003418  
Transaction ID : SB22.24335  
Amount of Each Disbursement this Period: 494914.25

Memo Item

Full Name (Last, First, Middle Initial)  
**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - GENERAL ACCOUNT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2017

FEC Identification Number: C00003418  
Transaction ID : SB22.24336  
Amount of Each Disbursement this Period: 1010786.10

Memo Item

Full Name (Last, First, Middle Initial)  
**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET PROCEEDS - GENERAL ACCOUNT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 29 / 2017

FEC Identification Number: C00003418  
Transaction ID : SB22.24342  
Amount of Each Disbursement this Period: 500627.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2006327.79

**TOTAL** This Period (last page this line number only)..... ▶ 3502634.53