

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 975 OF 2145

(check only one)

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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. ROBERTS, BLAINE, , ,

Mailing Address 2818 S LIPSCOMB

City
AMARILLOState
TXZip Code
79109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBERTS TRUCK CENTEROccupation (for Individual)
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
01	/	22	/	2020

Transaction ID : SA11AI.61923

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. ROBERTS, BURTON, , ,

Mailing Address 3112 WINDSOR RD 335

City
AUSTINState
TXZip Code
78703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
02	/	07	/	2020

Transaction ID : SA11AI.61925

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ROBERTS, DEREK, W., ,

Mailing Address 500 EAST WINDWARD LANDING PL

City
HAMPSTEADState
NCZip Code
28443FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2020

Transaction ID : SA11AI.61927

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

5550.00

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