

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

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

FOR LINE NUMBER: PAGE 4621 OF 15857

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE**

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

A. FRENCH, DANIEL, , ,

Mailing Address 1127 N SUNSET DR

City  
PIQUA

State  
OH

Zip Code  
45356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOMMCO

Occupation (for Individual)  
MANUFACTURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2019

Transaction ID : SA11AI.52446

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. FRENCH, DANIEL, , ,

Mailing Address 1127 N SUNSET DR

City  
PIQUA

State  
OH

Zip Code  
45356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOMMCO

Occupation (for Individual)  
MANUFACTURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2019

Transaction ID : SA11AI.48045

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. FRENCH, DAVID, , ,

Mailing Address 66 WHITETAIL DR

City  
NEW CASTLE

State  
CO

Zip Code  
81647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ELECTRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 26 / 2019

Transaction ID : SA11AI.9708

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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