

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.  12FE4M5

The Committee To Defend The President

ADDRESS (number and street) 441 North Lee Street Ste 205 Alexandria VA 22314

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00544767

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

## 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on  M M M /  D D D /  Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

Election on  M M M /  D D D /  Y Y Y Y Y Y in the State of

5. Covering Period  M M M /  D D D /  Y Y Y Y Y Y 01 / 01 / 2019 through  M M M /  D D D /  Y Y Y Y Y Y 01 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Backer, Dan, , , Type or Print Name of Treasurer

Signature of Treasurer Backer, Dan, , , [Electronically Filed] Date  M M M /  D D D /  Y Y Y Y Y Y 02 / 20 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

The Committee To Defend The President

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="2019"/>		720208.03
(b) Cash on Hand at Beginning of Reporting Period.....	720208.03	
(c) Total Receipts (from Line 19) .....	402183.55	402183.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1122391.58	1122391.58
7. Total Disbursements (from Line 31).....	361660.01	361660.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	760731.57	760731.57
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

Write or Type Committee Name

**The Committee To Defend The President**

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

<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).....	48832.75	48832.75
(ii) Unitemized .....	352317.10	352317.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	401149.85	401149.85
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	401149.85	401149.85
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	1033.70	1033.70
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)).....▶	402183.55	402183.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	402183.55	402183.55

**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 .....	68692.91	68692.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	68692.91	68692.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	268277.85	268277.85
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 .....	9193.00	9193.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	9193.00	9193.00
29. Other Disbursements (Including Non-Federal Donations).....	15496.25	15496.25
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)) ..	361660.01	361660.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	361660.01	361660.01

**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) .....	401149.85	401149.85
34. Total Contribution Refunds (from Line 28(d)) .....	9193.00	9193.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	391956.85	391956.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	68692.91	68692.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1033.70	1033.70
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	67659.21	67659.21

**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 116
	(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

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)  
**The Committee To Defend The President**

**A. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt  
 01 / 24 / 2019  
**Transaction ID : SA11A.1635265**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt  
 01 / 24 / 2019  
**Transaction ID : SA11A.1635266**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt  
 01 / 24 / 2019  
**Transaction ID : SA11A.1635267**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 75.00  
**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 7 OF 116
	<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)  
**The Committee To Defend The President**

**A. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635268**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635269**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635270**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.00  
**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 8 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635271**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1635794**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1635795**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 116
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<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)  
**The Committee To Defend The President**

**A. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1635796**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1635797**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1635798**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**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 10 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1639147**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. AKERSON, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 ROSE LANE  
 P.O. BOX 935  
 City BOLTON LANDING State NY Zip Code 12814-0935  
 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 ▼ 475.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1639148**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. BARLOCKER, CALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 254 EAST MAIN ST  
 P.O. BOX 776  
 City ENTERPRISE State UT Zip Code 84725  
 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 ▼ 350.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627236**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. BARLOCKER, CALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 254 EAST MAIN ST  
 P.O. BOX 776  
 City ENTERPRISE State UT Zip Code 84725  
 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 ▼ 350.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630490**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. BARLOCKER, CALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 254 EAST MAIN ST  
 P.O. BOX 776  
 City ENTERPRISE State UT Zip Code 84725  
 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 ▼ 350.00

Date of Receipt 01 / 27 / 2019  
**Transaction ID : SA11A.1636336**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. BARNARD, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 BROCADE AVE  
 City BAKERSFIELD State CA Zip Code 93312-7085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PETROL TRONSPORTINC Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 10 / 2019  
**Transaction ID : SA11A.1631430**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. BARRY, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 216 OBIE ROAD  
 City NEWMANSTOWN State PA Zip Code 17073-8980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) TRUCKING FARMING  
 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  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631432**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. BELLES, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 803 JACKSON ST  
 City FALLS CHURCH State VA Zip Code 22046-2834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROCK CREEK PARTNERS Occupation (for Individual) ATTORNEY  
 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  
 01 / 21 / 2019  
**Transaction ID : SA11A.1634445**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. BENEFIELD, ROSEMARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4551 MORAGA AVE  
 City SAN DIEGO State CA Zip Code 92117-3550  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631312**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. BLOEMHOF, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 4140

City SAN LUIS OBISPO	State CA	Zip Code 93403-4140
-------------------------	-------------	------------------------

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  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2019  
**Transaction ID : SA11A.1636724**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B. BORST, DONALD, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 LOIRE COURT

City MANCHESTER TOWNSHI	State NJ	Zip Code 08759-6285
----------------------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 08 / 2019  
**Transaction ID : SA11A.1629279**

Amount of Each Receipt this Period  
75.00

Memo Item CONTRIBUTION

**C. BORST, DONALD, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 LOIRE COURT

City MANCHESTER TOWNSHI	State NJ	Zip Code 08759-6285
----------------------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2019  
**Transaction ID : SA11A.1638116**

Amount of Each Receipt this Period  
75.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. BORST, DONALD, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 LOIRE COURT  
 City MANCHESTER TOWNSHI State NJ Zip Code 08759-6285  
 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 ▼ 225.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11A.1638117**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**B. BRAMBLE, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1287  
 City HASTINGS State NE Zip Code 68902-1287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIDAMERICA PUMP SUPPLY INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 18 / 2019  
**Transaction ID : SA11A.1633586**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. BRITT, HENRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 37135  
 City JACKSONVILLE State FL Zip Code 32236-7135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COURIER TRANSPORTATION Occupation (for Individual) MGR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627369**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	825.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. BRITT, HENRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 37135  
 City JACKSONVILLE State FL Zip Code 32236-7135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COURIER TRANSPORTATION Occupation (for Individual) MGR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627403**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. BRYANT, ALEXANDER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1800 N 16TH AVE 11  
 City HOLLYWOOD State FL Zip Code 33020-2548  
 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 ▼ 500.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11A.1638238**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. BURGIN, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5507 SONG BIRD LN  
 City FULSHEAR State TX Zip Code 77441-1613  
 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 ▼ 500.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641215**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1100.00  
**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 16 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 2800 STARLING DRIVE

City WILLIAMSBURG	State VA	Zip Code 23185-8045
----------------------	-------------	------------------------

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  

M M	/	D D	/	Y Y Y Y
01		16		2019

**Transaction ID : SA11A.1632915**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 6420 W. LAKERIDGE ROAD

City LAKEWOOD	State CO	Zip Code 80227-3909
------------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		15		2019

**Transaction ID : SA11A.1640609**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

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

Mailing Address 112 SOUTH LAKE EMORY DR.

City INMAN	State SC	Zip Code 29349-7257
---------------	-------------	------------------------

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

Name of Employer (for Individual) CONCEPT PACKAGING GROUP	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		05		2019

**Transaction ID : SA11A.1628733**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<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 17 OF 116
	<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

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)  
**The Committee To Defend The President**

**A. CLARK, ALBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 966

City STARKVILLE	State MS	Zip Code 39760-0966
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CCCLARK INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631507**

Amount of Each Receipt this Period  
 25.00

Memo Item  
 CONTRIBUTION

**B. CLARK, ALBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 966

City STARKVILLE	State MS	Zip Code 39760-0966
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CCCLARK INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 29 / 2019  
**Transaction ID : SA11A.1636900**

Amount of Each Receipt this Period  
 100.00

Memo Item  
 CONTRIBUTION

**C. CLARK, ALBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 966

City STARKVILLE	State MS	Zip Code 39760-0966
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CCCLARK INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : SA11A.1638775**

Amount of Each Receipt this Period  
 100.00

Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 18 OF 116  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**The Committee To Defend The President**

**A. CLARK, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 BEVERLY HILLS ROAD  
 612  
 City HATTIESBURG   State MS   Zip Code 39401-4494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UMUC   Occupation (for Individual) COMPUTER SCIENCE PROFESSOR  
 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  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631476**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B. CODY, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 86635  
 City BATON ROUGE   State LA   Zip Code 70879-6635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CODYS TRANSPORTATION SYSTEMS LLC   Occupation (for Individual) BUSINESS OWNER  
 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  
 01 / 09 / 2019  
**Transaction ID : SA11A.1629729**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. COOPER, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3807 HARDING PLACE  
 City NASHVILLE   State TN   Zip Code 37215-4030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COOPER STEEL FABRICATORS INC   Occupation (for Individual) PRESIDENT  
 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  
 01 / 05 / 2019  
**Transaction ID : SA11A.1627491**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 19 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. CORONA, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 BYRAM KINGWOOD RD  
 City STOCKTON State NJ Zip Code 08559-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SANTEN Occupation (for Individual) OPHTHALMIC CLINICAL SPECIALIST  
 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  
 01 / 12 / 2019  
**Transaction ID : SA11A.1632014**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. DAVIS, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 MARGARET STREET  
 City SAN JOSE State CA Zip Code 95112-2309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TMFC INC Occupation (for Individual) CONSULTANT  
 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  
 01 / 05 / 2019  
**Transaction ID : SA11A.1627153**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. DAVIS, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 MILLER LANDING ROAD  
 City TALLAHASSEE State FL Zip Code 32312-9670  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2019  
**Transaction ID : SA11A.1626395**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<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 20 OF 116
	<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)  
**The Committee To Defend The President**

**A. DAVIS, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 MILLER LANDING ROAD  
 City TALLAHASSEE State FL Zip Code 32312-9670  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2019  
**Transaction ID : SA11A.1627841**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**B. DAVIS, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 MILLER LANDING ROAD  
 City TALLAHASSEE State FL Zip Code 32312-9670  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631677**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**C. DAVIS, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2727 MILLER LANDING ROAD  
 City TALLAHASSEE State FL Zip Code 32312-9670  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631678**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<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 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 668 CHOCTAW DR.

City SAN JOSE	State CA	Zip Code 95123-4712
------------------	-------------	------------------------

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 ▼  
312.50

Date of Receipt  

M M / D D / Y Y Y Y Y
01 / 24 / 2019

**Transaction ID : SA11A.1635200**

Amount of Each Receipt this Period  
62.50

Memo Item  
CONTRIBUTION

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

Mailing Address 668 CHOCTAW DR.

City SAN JOSE	State CA	Zip Code 95123-4712
------------------	-------------	------------------------

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 ▼  
312.50

Date of Receipt  

M M / D D / Y Y Y Y Y
01 / 24 / 2019

**Transaction ID : SA11A.1635201**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2195 EAST EGBERT STREET  
118

City BRIGHTON	State CO	Zip Code 80601-2538
------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y
01 / 11 / 2019

**Transaction ID : SA11A.1631829**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	812.50
<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 116
	<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)  
**The Committee To Defend The President**

**A. DORAU, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 579 SOUTHERN OAK CIR.  
 City HARTLAND State WI Zip Code 53029-8005  
 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  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2019  
**Transaction ID : SA11A.1632795**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. DROWN, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 940 PROVIDENCE LN  
 City DUMONT State MN Zip Code 56236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FARMER Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2019  
**Transaction ID : SA11A.1641053**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item  
 CONTRIBUTION

**C. DUNHAM, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3220 WINDRIFT DRIVE  
 City FORT MILL State SC Zip Code 29708-6442  
 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  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631021**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. DUNHAM, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3220 WINDRIFT DRIVE  
 City FORT MILL State SC Zip Code 29708-6442  
 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  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631022**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. DUNHAM, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3220 WINDRIFT DRIVE  
 City FORT MILL State SC Zip Code 29708-6442  
 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  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631023**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**C. DUNHAM, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3220 WINDRIFT DRIVE  
 City FORT MILL State SC Zip Code 29708-6442  
 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  
 01 / 31 / 2019  
**Transaction ID : SA11A.1639354**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 24 OF 116  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**The Committee To Defend The President**

**A. DUPUIS, DANIELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 219 JOANN RD  
 City STROUDSBURG State PA Zip Code 18360-7668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 20 / 2019  
**Transaction ID : SA11A.1634106**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. DUPUIS, DANIELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 219 JOANN RD  
 City STROUDSBURG State PA Zip Code 18360-7668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11A.1638015**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. ECKER, PATTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 TIMMIE LN  
 City WATERFORD State CA Zip Code 95386  
 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 ▼ 265.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630626**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 362.50  
**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 25 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. ECKER, PATTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 TIMMIE LN  
 City WATERFORD State CA Zip Code 95386  
 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 ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2019  
**Transaction ID : SA11A.1630627**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**B. ECKER, PATTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 TIMMIE LN  
 City WATERFORD State CA Zip Code 95386  
 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 ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2019  
**Transaction ID : SA11A.1630628**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**C. ECKER, PATTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 TIMMIE LN  
 City WATERFORD State CA Zip Code 95386  
 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 ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2019  
**Transaction ID : SA11A.1630629**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<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 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 519 TIMMIE LN

City WATERFORD	State CA	Zip Code 95386
-------------------	-------------	-------------------

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 ▼  
265.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		14		2019

**Transaction ID : SA11A.1632618**

Amount of Each Receipt this Period  

12.50
-------

Memo Item  
CONTRIBUTION

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

Mailing Address 519 TIMMIE LN

City WATERFORD	State CA	Zip Code 95386
-------------------	-------------	-------------------

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 ▼  
265.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		14		2019

**Transaction ID : SA11A.1632619**

Amount of Each Receipt this Period  

25.00
-------

Memo Item  
CONTRIBUTION

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

Mailing Address 519 TIMMIE LN

City WATERFORD	State CA	Zip Code 95386
-------------------	-------------	-------------------

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 ▼  
265.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		24		2019

**Transaction ID : SA11A.1641417**

Amount of Each Receipt this Period  

65.00
-------

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.50
<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 116
	<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)  
**The Committee To Defend The President**

**A. EDWARDS, CATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4239 BLUEBONNET HILLTOP DR.  
 City FORT WORTH State TX Zip Code 76126-5208  
 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 ▼ 500.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626514**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. EVANS, CHARLES, GREGORY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1150 GEMINI ST.  
 City HOUSTON State TX Zip Code 77058-2708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSAL WEATHER AND AVIATION INC Occupation (for Individual) CHAIRMAN OF THE BOARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 10 / 2019  
**Transaction ID : SA11A.1630803**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. FARRELL, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2521 WESTGATE DRIVE  
 City HOUSTON State TX Zip Code 77019-6609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RESMED INC Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1629742**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. FEHRS, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 WOODTICK ROAD  
 City WOLCOTT State CT Zip Code 06716-1535  
 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 ▼ 225.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626322**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. FEHRS, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 WOODTICK ROAD  
 City WOLCOTT State CT Zip Code 06716-1535  
 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 ▼ 225.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626323**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. FEHRS, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 WOODTICK ROAD  
 City WOLCOTT State CT Zip Code 06716-1535  
 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 ▼ 225.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1629977**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<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 29 OF 116
	<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)  
**The Committee To Defend The President**

**A. FEHRS, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 WOODTICK ROAD  
 City WOLCOTT State CT Zip Code 06716-1535  
 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 ▼ 225.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1629978**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. FEHRS, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 WOODTICK ROAD  
 City WOLCOTT State CT Zip Code 06716-1535  
 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 ▼ 225.00

Date of Receipt 01 / 12 / 2019  
**Transaction ID : SA11A.1632041**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. FELIX, RALPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2604 GRAND CANAL  
 City VENICE State CA Zip Code 90291-4549  
 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 ▼ 225.00

Date of Receipt 01 / 06 / 2019  
**Transaction ID : SA11A.1628990**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**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 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 2604 GRAND CANAL

City VENICE	State CA	Zip Code 90291-4549
----------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		15		2019

**Transaction ID : SA11A.1632849**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

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

Mailing Address 2604 GRAND CANAL

City VENICE	State CA	Zip Code 90291-4549
----------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		29		2019

**Transaction ID : SA11A.1637766**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

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

Mailing Address 625 BILTMORE WAY  
APT 505

City MIAMI	State FL	Zip Code 33134-7537
---------------	-------------	------------------------

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  

M M	/	D D	/	Y Y Y Y
01		05		2019

**Transaction ID : SA11A.1627884**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. GAMBLE, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 REBECCA RD  
 City WOODSTOCK State AL Zip Code 35188-4364  
 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 ▼ 225.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1641522**  
 Amount of Each Receipt this Period 225.00  
 Memo Item CONTRIBUTION

**B. GAMBLE, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 175 HUGUENOT ST PH501  
 City NEW ROCHELLE State NY Zip Code 10801-7767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INS BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627317**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. GASHENKO, LUDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5401 OLD SEWARD HWY  
 City ANCHORAGE State AK Zip Code 99518-1458  
 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 ▼ 450.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635184**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 116
	<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)  
**The Committee To Defend The President**

**A. GASHENKO, LUDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5401 OLD SEWARD HWY  
 City ANCHORAGE State AK Zip Code 99518-1458  
 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 ▼ 450.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635185**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. GASHENKO, LUDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5401 OLD SEWARD HWY  
 City ANCHORAGE State AK Zip Code 99518-1458  
 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 ▼ 450.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641185**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

**C. GIFFIN, CHERYL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3296 HOLLOW CORNERS RD  
 City DRYDEN State MI Zip Code 48428-9729  
 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 ▼ 800.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628070**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

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

Mailing Address 3296 HOLLOW CORNERS RD

City DRYDEN	State MI	Zip Code 48428-9729
----------------	-------------	------------------------

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 ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 09 / 2019

**Transaction ID : SA11A.1630264**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

Mailing Address 3296 HOLLOW CORNERS RD

City DRYDEN	State MI	Zip Code 48428-9729
----------------	-------------	------------------------

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 ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 09 / 2019

**Transaction ID : SA11A.1630265**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

Mailing Address 3296 HOLLOW CORNERS RD

City DRYDEN	State MI	Zip Code 48428-9729
----------------	-------------	------------------------

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 ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2019

**Transaction ID : SA11A.1631734**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 34 OF 116
	<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)  
**The Committee To Defend The President**

**A. GIFFIN, CHERYL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3296 HOLLOW CORNERS RD  
 City DRYDEN State MI Zip Code 48428-9729  
 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 ▼ 800.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635446**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. GRAY, DEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2558 S RIATA CT  
 City GILBERT State AZ Zip Code 85295-5948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SURGICAL PROFESSIONALS Occupation (for Individual) GENERAL SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : SA11A.1635183**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. GUNTER, CURTIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7225 OLD MONROE RD.  
 City BASTROP State LA Zip Code 71220-7264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INSPECTOR OIL GAS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 06 / 2019  
**Transaction ID : SA11A.1628853**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 35 OF 116
	<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)  
**The Committee To Defend The President**

**A. HACKER, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1395 CRAWFORD AVENUE  
 City REEDLEY State CA Zip Code 93654-9761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INSULFLOW 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  
 01 / 31 / 2019  
**Transaction ID : SA11A.1638781**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. HALL EVANS, PHYLLIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2469  
 City RIVERSIDE State CA Zip Code 92516-2469  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 04 / 2019  
**Transaction ID : SA11A.1626962**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. HALL EVANS, PHYLLIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2469  
 City RIVERSIDE State CA Zip Code 92516-2469  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 09 / 2019  
**Transaction ID : SA11A.1630564**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 36 OF 116
	<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)  
**The Committee To Defend The President**

**A. HALTOM, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2211 PECH RD  
 City HOUSTON State TX Zip Code 77055-1117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEXAS REPUBLIC SIGNS Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627101**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. HANKS, CAROL, ANNE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 SO. BRUANT BLVD.  
 City SAN ANGELO State TX Zip Code 76903  
 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 01 / 09 / 2019  
**Transaction ID : SA11A.1630404**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HAYDEN, BARBARA, J., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1300 W HENRY ST  
 City SEDALIA State MO Zip Code 65301-2753  
 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 ▼ 500.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641183**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. HENDERICKS, EARNESTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2549 W LAKE VAN NESS CIR  
 City FRESNO State CA Zip Code 93711-7023  
 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 ▼ 350.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641419**  
 Amount of Each Receipt this Period 350.00  
 Memo Item CONTRIBUTION

**B. HIGGINS, DENZLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 72403  
 City FAIRBANKS State AK Zip Code 99707-2403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HSA HIGGINS SONS ASSOCIATES Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2019  
**Transaction ID : SA11A.1636033**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HONG, SUNHEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13740 MIDWAY RD. 506  
 City DALLAS State TX Zip Code 75244-4314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) DENTIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : SA11A.1632919**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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 38 OF 116
	<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)  
**The Committee To Defend The President**

**A. HOOKER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1112 GRANADA ST  
 City COLORADO SPRINGS State CO Zip Code 80909  
 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 ▼ 225.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : SA11A.1641115**  
 Amount of Each Receipt this Period 225.00  
 Memo Item CONTRIBUTION

**B. HUBBART, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3095 KEY HARBOUR DRIVE  
 City LAKE SAINT LOUIS State MO Zip Code 63367-2097  
 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 ▼ 350.00

Date of Receipt 01 / 07 / 2019  
**Transaction ID : SA11A.1629097**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HUBBART, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3095 KEY HARBOUR DRIVE  
 City LAKE SAINT LOUIS State MO Zip Code 63367-2097  
 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 ▼ 350.00

Date of Receipt 01 / 10 / 2019  
**Transaction ID : SA11A.1631157**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	575.00
<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 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 8600 MISSION RD

City HOUSTON	State TX	Zip Code 77089
-----------------	-------------	-------------------

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 ▼  
220.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	18	/	2019

**Transaction ID : SA11A.1641055**

Amount of Each Receipt this Period  
220.00

Memo Item  
CONTRIBUTION

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

Mailing Address 13149 N. COUNTRY CLUB COURT

City PALOS HEIGHTS	State IL	Zip Code 60463-2727
-----------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	29	/	2019

**Transaction ID : SA11A.1641724**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 18279

City CORPUS CHRISTI	State TX	Zip Code 78480-8279
------------------------	-------------	------------------------

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  

M M	/	D D	/	Y Y Y Y
01	/	21	/	2019

**Transaction ID : SA11A.1634580**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	970.00
<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 40 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address **148 LAKEVIEW CIRCLE**

City <b>CROPWELL</b>	State <b>AL</b>	Zip Code <b>35054-3018</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>CHILDRENS OF ALABAMA</b>	Occupation (for Individual) <b>NURSE EDUCATOR</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2019

**Transaction ID : SA11A.1632011**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
CONTRIBUTION

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

Mailing Address **148 LAKEVIEW CIRCLE**

City <b>CROPWELL</b>	State <b>AL</b>	Zip Code <b>35054-3018</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>CHILDRENS OF ALABAMA</b>	Occupation (for Individual) <b>NURSE EDUCATOR</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2019

**Transaction ID : SA11A.1634870**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
CONTRIBUTION

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

Mailing Address **148 LAKEVIEW CIRCLE**

City <b>CROPWELL</b>	State <b>AL</b>	Zip Code <b>35054-3018</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>CHILDRENS OF ALABAMA</b>	Occupation (for Individual) <b>NURSE EDUCATOR</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2019

**Transaction ID : SA11A.1635219**

Amount of Each Receipt this Period  

25.00
-------

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>175.00</b>
<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 41 OF 116
	<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)  
**The Committee To Defend The President**

**A. JOHNSTON, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 148 LAKEVIEW CIRCLE  
 City CROPWELL State AL Zip Code 35054-3018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHILDRENS OF ALABAMA Occupation (for Individual) NURSE EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1638919**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. JOHNSON, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 RIDGEWOOD ROAD  
 City DULUTH State MN Zip Code 55804-1732  
 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 ▼ 1000.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641316**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. KEINATH, WARREN, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 RAVENS POINTE DR.  
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238  
 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 ▼ 300.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628155**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. KEINATH, WARREN, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 RAVENS POINTE DR.  
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238  
 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 ▼ 300.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628156**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. KEINATH, WARREN, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 RAVENS POINTE DR.  
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238  
 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 ▼ 300.00

Date of Receipt 01 / 06 / 2019  
**Transaction ID : SA11A.1628952**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. KIRK, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1140 BIMINI LANE  
 City SINGER ISLAND State FL Zip Code 33404-2706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627147**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 43 OF 116  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**The Committee To Defend The President**

**A. KNIFFING, EVA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14940 OAK CREEK RD.  
 City EL CAJON State CA Zip Code 92021-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KNIFFINGS DISCOUNT NURSERY Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 10 / 2019  
**Transaction ID : SA11A.1631413**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. KNIFFING, EVA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14940 OAK CREEK RD.  
 City EL CAJON State CA Zip Code 92021-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KNIFFINGS DISCOUNT NURSERY Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.1637931**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. KRAMIEN, RICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17600 NE OLDS LN  
 City NEWBERG State OR Zip Code 97132-6741  
 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 ▼ 250.00

Date of Receipt 01 / 15 / 2019  
**Transaction ID : SA11A.1640636**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 44 OF 116
<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)  
**The Committee To Defend The President**

**A. LAUGHARN, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 426 LORRAINE BLVD  
 City LOS ANGELES State CA Zip Code 90020-4730  
 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 ▼ 1000.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1641739**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. LEVANG, PATSY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10841 HWY 73  
 City WATFORD CITY State ND Zip Code 58854-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) AGRICULTURE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626226**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. LEVANG, PATSY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10841 HWY 73  
 City WATFORD CITY State ND Zip Code 58854-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) AGRICULTURE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 08 / 2019  
**Transaction ID : SA11A.1629174**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. LEVANG, PATSY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10841 HWY 73  
 City WATFORD CITY State ND Zip Code 58854-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) AGRICULTURE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.1636802**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. LEVANG, PATSY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10841 HWY 73  
 City WATFORD CITY State ND Zip Code 58854-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) AGRICULTURE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1638641**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. LIVELY, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16400 GENITO ROAD  
 City MOSELEY State VA Zip Code 23120-1071  
 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 01 / 25 / 2019  
**Transaction ID : SA11A.1635822**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. LUND, KATHLEEN M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 CLUB HOUSE DR.  
 City PASADENA State CA Zip Code 91105-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALLAN LUND COMPANY Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2019  
**Transaction ID : SA11A.1641420**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. MAIRS, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30230 HART OAKS DR.  
 City KEENE State CA Zip Code 93531-1512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COX PETROLEUM TRANSPORT Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11A.1638070**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. MARTINI JR., ROBERT, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 713 N ZANE HWY  
 City MARTINS FERRY State OH Zip Code 43935-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FALCON Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628812**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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 116
	<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

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)  
**The Committee To Defend The President**

**A. MARTINI JR., ROBERT, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 713 N ZANE HWY  
 City MARTINS FERRY State OH Zip Code 43935-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FALCON Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 01 / 17 / 2019  
**Transaction ID : SA11A.1633514**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

**B. MARTINI JR., ROBERT, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 713 N ZANE HWY  
 City MARTINS FERRY State OH Zip Code 43935-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FALCON Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1640524**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**C. MARTINI JR., ROBERT, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 713 N ZANE HWY  
 City MARTINS FERRY State OH Zip Code 43935-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FALCON Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1640525**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. MARTIN, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1373 FLANAGAN DR.  
 City CHRISTIANSBURG State VA Zip Code 24073  
 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 ▼ 262.50

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631640**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. MARTIN, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1373 FLANAGAN DR.  
 City CHRISTIANSBURG State VA Zip Code 24073  
 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 ▼ 262.50

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1634923**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION

**C. MARTIN, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1373 FLANAGAN DR.  
 City CHRISTIANSBURG State VA Zip Code 24073  
 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 ▼ 262.50

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1634924**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.50
<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 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 1373 FLANAGAN DR.

City CHRISTIANSBURG	State VA	Zip Code 24073
------------------------	-------------	-------------------

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 ▼  
262.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : SA11A.1639286**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1373 FLANAGAN DR.

City CHRISTIANSBURG	State VA	Zip Code 24073
------------------------	-------------	-------------------

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 ▼  
262.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : SA11A.1639287**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 261 WEST 35TH ST  
SUITE 507

City NEW YORK	State NY	Zip Code 10001-1902
------------------	-------------	------------------------

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

Name of Employer (for Individual) GSR LOGISTICS LLC	Occupation (for Individual) BUSINESS
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : SA11A.1637970**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 50 OF 116  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**The Committee To Defend The President**

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

Mailing Address **5026 GREEN PINE DRIVE**

City **ATLANTA**    State **GA**    Zip Code **30342-2402**

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 ▼ **225.00**

Date of Receipt  
**01 / 26 / 2019**

**Transaction ID : SA11A.1636082**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **5026 GREEN PINE DRIVE**

City **ATLANTA**    State **GA**    Zip Code **30342-2402**

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 ▼ **225.00**

Date of Receipt  
**01 / 30 / 2019**

**Transaction ID : SA11A.1638206**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **5026 GREEN PINE DRIVE**

City **ATLANTA**    State **GA**    Zip Code **30342-2402**

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 ▼ **225.00**

Date of Receipt  
**01 / 30 / 2019**

**Transaction ID : SA11A.1638207**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **175.00**

**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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. MCKENNEY, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5026 GREEN PINE DRIVE  
 City ATLANTA State GA Zip Code 30342-2402  
 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 ▼ 225.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1639382**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. MEFFORD, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 672  
 City EDWARDSVILLE State IL Zip Code 62025-0672  
 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 ▼ 260.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628141**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. MEFFORD, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 672  
 City EDWARDSVILLE State IL Zip Code 62025-0672  
 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 ▼ 260.00

Date of Receipt 01 / 06 / 2019  
**Transaction ID : SA11A.1628951**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<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 52 OF 116
	<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)  
**The Committee To Defend The President**

**A. MEFFORD, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 672  
 City EDWARDSVILLE State IL Zip Code 62025-0672  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631762**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. MEFFORD, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 672  
 City EDWARDSVILLE State IL Zip Code 62025-0672  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 20 / 2019  
**Transaction ID : SA11A.1634297**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**C. MEFFORD, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 672  
 City EDWARDSVILLE State IL Zip Code 62025-0672  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2019  
**Transaction ID : SA11A.1634743**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<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 53 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address P.O. BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025-0672
----------------------	-------------	------------------------

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 ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2019

**Transaction ID : SA11A.1638365**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025-0672
----------------------	-------------	------------------------

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 ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : SA11A.1639782**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

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

Mailing Address 100 MOORINGS PARK DRIVE  
F204

City NAPLES	State FL	Zip Code 34105-2165
----------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		09		2019

**Transaction ID : SA11A.1630165**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 116
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**The Committee To Defend The President**

**A. METCALF, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 MOORINGS PARK DRIVE  
 F204  
 City NAPLES State FL Zip Code 34105-2165  
 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 ▼ 300.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630166**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. METCALF, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 MOORINGS PARK DRIVE  
 F204  
 City NAPLES State FL Zip Code 34105-2165  
 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 ▼ 300.00

Date of Receipt 01 / 20 / 2019  
**Transaction ID : SA11A.1634252**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. MEYER, STAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1319 LAKE SHORE DR.  
 City BEATRICE State NE Zip Code 68310-4742  
 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 01 / 07 / 2019  
**Transaction ID : SA11A.1629099**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. MILLER, FAYE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 COUNTY ROAD 113  
 City SANTA FE State NM Zip Code 87506-8343  
 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 01 / 10 / 2019  
**Transaction ID : SA11A.1631284**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. MIRSKY, CYNTHIA, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25331 DERBYHILL DR.  
 City LAGUNA HILLS State CA Zip Code 92653-7836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PACIFIC RIM CAPITAL INC Occupation (for Individual) DIRECTOR, SPECIAL PROJECTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 22 / 2019  
**Transaction ID : SA11A.1640912**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. MOCK, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 ADLIN AVE  
 City HOUSTON State PA Zip Code 15342-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LAUREL SAND AND STONE Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628828**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<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 56 OF 116
	<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)  
**The Committee To Defend The President**

**A. MOUNCE, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 DELANO PL. NE  
 City ALBUQUERQUE State NM Zip Code 87106-2035  
 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 ▼ 2000.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.1637951**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

**B. MUNIZ, ADELAIDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 ANNA ST  
 City BOYNTON BEACH State FL Zip Code 33435-5201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARDINAL NEWMON HIGH SCHOOL Occupation (for Individual) TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 25 / 2019  
**Transaction ID : SA11A.1641448**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

**C. MUZYCZYN, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5402 WEDGEWOOD LN  
 City CORPUS CHRISTI State TX Zip Code 78411-4833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIKES AIRCRAFT SHOP INC Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2019  
**Transaction ID : SA11A.1632008**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2550.00
<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 57 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 4300 BAKER ROAD

City MINNETONKA	State MN	Zip Code 55343-8600
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RESTAURANTS NO LIMIT	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
01 / 02 / 2019

**Transaction ID : SA11A.1626042**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 6628 CIMARRON CIRCLE

City RICHMOND	State IN	Zip Code 47374
------------------	-------------	-------------------

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

Name of Employer (for Individual) SALES	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
01 / 21 / 2019

**Transaction ID : SA11A.1641010**

Amount of Each Receipt this Period  
400.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109-0328
------------------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
01 / 05 / 2019

**Transaction ID : SA11A.1628370**

Amount of Each Receipt this Period  
75.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	725.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. OLSON, LESTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 9328  
 City SALT LAKE CITY State UT Zip Code 84109-0328  
 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 ▼ 225.00

Date of Receipt 01 / 10 / 2019  
**Transaction ID : SA11A.1631267**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. OLSON, LESTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 9328  
 City SALT LAKE CITY State UT Zip Code 84109-0328  
 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 ▼ 225.00

Date of Receipt 01 / 14 / 2019  
**Transaction ID : SA11A.1632597**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. PAGANINI, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8863 ROBIN LN  
 City KIRTLAND State OH Zip Code 44094-9768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KD Occupation (for Individual) REAL ESTATE DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2019  
**Transaction ID : SA11A.1632486**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 59 OF 116
	<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)  
**The Committee To Defend The President**

**A. PAMPENA, MARGARITA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1345 ORCHARD AVE  
 City NEW KENSINGTON State PA Zip Code 15068-5525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVH Occupation (for Individual) RW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 22 / 2019  
**Transaction ID : SA11A.1640911**  
 Amount of Each Receipt this Period 225.00  
 Memo Item  
**CONTRIBUTION**

**B. PARRISH, MARY, KELLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 SUGAR CREEK COURT  
 City NORTH LITTLE ROCK State AR Zip Code 72116-6351  
 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 ▼ 210.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626488**  
 Amount of Each Receipt this Period 35.00  
 Memo Item  
**CONTRIBUTION**

**C. PARRISH, MARY, KELLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 SUGAR CREEK COURT  
 City NORTH LITTLE ROCK State AR Zip Code 72116-6351  
 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 ▼ 210.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626489**  
 Amount of Each Receipt this Period 35.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	295.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. PARRISH, MARY, KELLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 SUGAR CREEK COURT  
 City NORTH LITTLE ROCK State AR Zip Code 72116-6351  
 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 ▼ 210.00

Date of Receipt 01 / 04 / 2019  
**Transaction ID : SA11A.1626884**  
 Amount of Each Receipt this Period 35.00  
 Memo Item CONTRIBUTION

**B. PARRISH, MARY, KELLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 SUGAR CREEK COURT  
 City NORTH LITTLE ROCK State AR Zip Code 72116-6351  
 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 ▼ 210.00

Date of Receipt 01 / 04 / 2019  
**Transaction ID : SA11A.1626885**  
 Amount of Each Receipt this Period 35.00  
 Memo Item CONTRIBUTION

**C. PARRISH, MARY, KELLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 SUGAR CREEK COURT  
 City NORTH LITTLE ROCK State AR Zip Code 72116-6351  
 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 ▼ 210.00

Date of Receipt 01 / 17 / 2019  
**Transaction ID : SA11A.1640919**  
 Amount of Each Receipt this Period 70.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. PECK, ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 LASSO LAKE COURT  
 City LINCOLN State CA Zip Code 95648-8105  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2019  
**Transaction ID : SA11A.1635980**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B. PODPECHAN, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 3226  
 City TULSA State OK Zip Code 74101-3226  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2019  
**Transaction ID : SA11A.1628213**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**C. PODPECHAN, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 3226  
 City TULSA State OK Zip Code 74101-3226  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 21 / 2019  
**Transaction ID : SA11A.1634562**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. PODPECHAN, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 3226  
 City TULSA State OK Zip Code 74101-3226  
 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 ▼ 300.00

Date of Receipt 01 / 23 / 2019  
**Transaction ID : SA11A.1641388**  
 Amount of Each Receipt this Period 150.00  
 Memo Item CONTRIBUTION

**B. PRATT, JOHN, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1479 SW SHORELINE DRIVE  
 City PALM CITY State FL Zip Code 34990-4535  
 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 01 / 05 / 2019  
**Transaction ID : SA11A.1627950**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. PRATT, JOHN, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1479 SW SHORELINE DRIVE  
 City PALM CITY State FL Zip Code 34990-4535  
 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 01 / 16 / 2019  
**Transaction ID : SA11A.1633021**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. PRATT, JOHN, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1479 SW SHORELINE DRIVE  
 City PALM CITY State FL Zip Code 34990-4535  
 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 01 / 29 / 2019  
**Transaction ID : SA11A.1637339**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. PROTELSCH, AMILIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1759 GRANADA STREET  
 City SEASIDE State CA Zip Code 93955-4001  
 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 ▼ 1824.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : SA11A.1633118**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. PROTELSCH, AMILIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1759 GRANADA STREET  
 City SEASIDE State CA Zip Code 93955-4001  
 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 ▼ 1824.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : SA11A.1633119**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. PROTELSCH, AMLIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1759 GRANADA STREET  
 City SEASIDE State CA Zip Code 93955-4001  
 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 ▼ 1824.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : SA11A.1633120**  
 Amount of Each Receipt this Period 1759.00  
 Memo Item CONTRIBUTION

**B. PROTELSCH, AMLIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1759 GRANADA STREET  
 City SEASIDE State CA Zip Code 93955-4001  
 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 ▼ 1824.00

Date of Receipt 01 / 20 / 2019  
**Transaction ID : SA11A.1634380**  
 Amount of Each Receipt this Period 15.00  
 Memo Item CONTRIBUTION

**C. PROVENZANO, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1411 DIPLOMAT PKWY  
 City HOLLYWOOD State FL Zip Code 33019-2229  
 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 01 / 28 / 2019  
**Transaction ID : SA11A.1636528**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2024.00
<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 65 OF 116
	<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

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)  
**The Committee To Defend The President**

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

Mailing Address 3707 GILBERT AVE  
17

City DALLAS State TX Zip Code 75219-4316

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  
01 / 31 / 2019  
**Transaction ID : SA11A.1639896**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

Mailing Address 7119 ANTRIM CT.

City MINNEAPOLIS State MN Zip Code 55439-1702

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

Name of Employer (for Individual) GERONIMO ENERGY Occupation (for Individual) ALTERNATIVE ENERGIES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 05 / 2019  
**Transaction ID : SA11A.1627052**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

Mailing Address 701 OSPREY POINT CIRCLE

City BOCA RATON State FL Zip Code 33431-5245

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

Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) BUSINESSMAN

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
01 / 09 / 2019  
**Transaction ID : SA11A.1629737**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 66 OF 116
	<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)  
**The Committee To Defend The President**

**A. RAY, OGALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3481 ROCKCLIFF W  
 City LONGWOOD State FL Zip Code 32779-3143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JEUNESSE Occupation (for Individual) CEO  
 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  
 01 / 31 / 2019  
**Transaction ID : SA11A.1638690**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. REISS, CLAIRE, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 0675 LA JOLLA FARMS ROAD  
 City LA JOLLA State CA Zip Code 92037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) REAL REAT ESTATE  
 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  
 01 / 05 / 2019  
**Transaction ID : SA11A.1627417**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**CONTRIBUTION**

**C. REISS, CLAIRE, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 0675 LA JOLLA FARMS ROAD  
 City LA JOLLA State CA Zip Code 92037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) REAL REAT ESTATE  
 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  
 01 / 11 / 2019  
**Transaction ID : SA11A.1631549**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<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 116  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**The Committee To Defend The President**

**A. REISS, CLAIRE, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 0675 LA JOLLA FARMS ROAD  
 City LA JOLLA State CA Zip Code 92037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) REAL REAT ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : SA11A.1636431**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. RICHARDSON, SUE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7342 COUNTRY CLUB DR.  
 City LA JOLLA State CA Zip Code 92037-5616  
 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 01 / 29 / 2019  
**Transaction ID : SA11A.1637786**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. ROGERS, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 WINDSOR DR.  
 City ROCKWALL State TX Zip Code 75032-7447  
 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 01 / 09 / 2019  
**Transaction ID : SA11A.1630365**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 116
	<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)  
**The Committee To Defend The President**

**A. ROTAN, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 413 LONGWOODS LANE  
 City HOUSTON State TX Zip Code 77024-5616  
 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 ▼ 600.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630407**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. ROTAN, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 413 LONGWOODS LANE  
 City HOUSTON State TX Zip Code 77024-5616  
 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 ▼ 600.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1639949**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. RUDOLECH, JUNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3646 CASPER CT  
 City ANCHORAGE State AK Zip Code 99502-3035  
 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 ▼ 350.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630685**  
 Amount of Each Receipt this Period 350.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SANSOM, JOHN, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 05 / 2019 <b>Transaction ID : SA11A.1627038</b>
Mailing Address 9455 PENSACOLA BOULEVARD SUITE B		Amount of Each Receipt this Period 250.00
City PENSACOLA	State FL	Zip Code 32534-1237
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) JOHN M SANSOM PA	Occupation (for Individual) ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SAUER, KYMBERLEY, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 03 / 2019 <b>Transaction ID : SA11A.1626547</b>
Mailing Address 310 S WHITCOMB ST		Amount of Each Receipt this Period 75.00
City FORT COLLINS	State CO	Zip Code 80521-2644
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SAUER, KYMBERLEY, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 05 / 2019 <b>Transaction ID : SA11A.1628334</b>
Mailing Address 310 S WHITCOMB ST		Amount of Each Receipt this Period 75.00
City FORT COLLINS	State CO	Zip Code 80521-2644
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<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 70 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. SAUER, KYMBERLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 S WHITCOMB ST  
 City FORT COLLINS State CO Zip Code 80521-2644  
 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 ▼ 300.00

Date of Receipt 01 / 08 / 2019  
**Transaction ID : SA11A.1629554**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**B. SAUER, KYMBERLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 S WHITCOMB ST  
 City FORT COLLINS State CO Zip Code 80521-2644  
 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 ▼ 300.00

Date of Receipt 01 / 08 / 2019  
**Transaction ID : SA11A.1629555**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**C. SCHAUER, ADELIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 445  
 City ALAMOGORDO State NM Zip Code 88311-0445  
 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 ▼ 220.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628428**  
 Amount of Each Receipt this Period 35.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	185.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. SCHAUER, ADELIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 445  
 City ALAMOGORDO State NM Zip Code 88311-0445  
 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 ▼ 220.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : SA11A.1637752**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. SCHAUER, ADELIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 445  
 City ALAMOGORDO State NM Zip Code 88311-0445  
 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 ▼ 220.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11A.1638490**  
 Amount of Each Receipt this Period 35.00  
 Memo Item CONTRIBUTION

**C. SCHAUER, ADELIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 445  
 City ALAMOGORDO State NM Zip Code 88311-0445  
 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 ▼ 220.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1640142**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	185.00
<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 72 OF 116
	<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)  
**The Committee To Defend The President**

**A. SCIANNA, PAULA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16931 SEMINOLE RIDGE DRIVE  
 City CYPRESS State TX Zip Code 77433-3482  
 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 ▼ 600.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1628280**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. SCIANNA, PAULA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16931 SEMINOLE RIDGE DRIVE  
 City CYPRESS State TX Zip Code 77433-3482  
 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 ▼ 600.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1639963**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. SHAW, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 MAPLE KNOLL ROAD  
 City COLDWATER State MI Zip Code 49036-7816  
 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 ▼ 500.00

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631740**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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 73 OF 116
	(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

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)  
**The Committee To Defend The President**

**A. SHAW, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 MAPLE KNOLL ROAD  
 City COLDWATER State MI Zip Code 49036-7816  
 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 ▼ 500.00

Date of Receipt 01 / 17 / 2019  
**Transaction ID : SA11A.1633349**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. SHEPHERD, GWEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 325 WEST RUTHERFORD ST  
 City LANDRUM State SC Zip Code 29356-9451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE HAYRACK INC Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 04 / 2019  
**Transaction ID : SA11A.1627008**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. SHERMAN, CLEONE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4403 PIONEER RD SE 324  
 City ALEXANDRIA State MN Zip Code 56308-9219  
 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 ▼ 1250.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626462**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. SHERMAN, CLEONE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4403 PIONEER RD SE  
 324  
 City ALEXANDRIA State MN Zip Code 56308-9219  
 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 ▼  
 1250.00

Date of Receipt  
 01 / 09 / 2019  
**Transaction ID : SA11A.1630297**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. SHERMAN, CLEONE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4403 PIONEER RD SE  
 324  
 City ALEXANDRIA State MN Zip Code 56308-9219  
 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 ▼  
 1250.00

Date of Receipt  
 01 / 23 / 2019  
**Transaction ID : SA11A.1634988**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**C. SHERMAN, CLEONE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4403 PIONEER RD SE  
 324  
 City ALEXANDRIA State MN Zip Code 56308-9219  
 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 ▼  
 1250.00

Date of Receipt  
 01 / 31 / 2019  
**Transaction ID : SA11A.1639725**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. SHERMAN, CLEONE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4403 PIONEER RD SE  
 324  
 City ALEXANDRIA State MN Zip Code 56308-9219  
 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 ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : SA11A.1639726**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**B. SHUAIB, TAWHID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 BURNS DRIVE SOUTH  
 City MCALLEN State TX Zip Code 78503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DHR HEART INSTITUTE Occupation (for Individual) M.D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2019  
**Transaction ID : SA11A.1630895**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. SKUPNY, REGINALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 382 MASSACHUSETTS AVE  
 704  
 City ARLINGTON State MA Zip Code 02474-6728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SHIPEX Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2019  
**Transaction ID : SA11A.1631431**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. SLOAN, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8300 NORTH FM 620  
 K100  
 City AUSTIN State TX Zip Code 78726-4007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INVESTMENTS  
 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  
 01 / 31 / 2019  
**Transaction ID : SA11A.1638856**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. SMITH, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 876 COUNTY ROAD 146  
 City BURNS State WY Zip Code 82053-9810  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2019  
**Transaction ID : SA11A.1641472**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item  
 CONTRIBUTION

**C. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2019  
**Transaction ID : SA11A.1626224**  
 Amount of Each Receipt this Period  
 12.50  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	487.50
<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 77 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626225**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 06 / 2019  
**Transaction ID : SA11A.1628837**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1629706**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631448**  
 Amount of Each Receipt this Period 6.25  
 Memo Item CONTRIBUTION

**B. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631449**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. SWARAT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1477 W CHENNAULT AVE  
 City FRESNO State CA Zip Code 93711-0515  
 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 ▼ 203.75

Date of Receipt 01 / 15 / 2019  
**Transaction ID : SA11A.1640746**  
 Amount of Each Receipt this Period 35.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	66.25
<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 79 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 800 W AZEELE ST  
APT 422

City HOWELL State MI Zip Code 48843

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 ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
01 / 16 / 2019

**Transaction ID : SA11A.1641123**

Amount of Each Receipt this Period  
400.00

Memo Item CONTRIBUTION

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

Mailing Address 1239 CANE CREEK RD

City FLETCHER State NC Zip Code 28732-9474

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 07 / 2019

**Transaction ID : SA11A.1629062**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 1839

City DUNDEE State FL Zip Code 33838-1839

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

Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) CITRUS FARMER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2019

**Transaction ID : SA11A.1629745**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 80 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address P.O. BOX 1839

City DUNDEE	State FL	Zip Code 33838-1839
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) CITRUS FARMER
--	--

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
01	/	29	/	2019

**Transaction ID : SA11A.1636849**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 1839

City DUNDEE	State FL	Zip Code 33838-1839
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) CITRUS FARMER
--	--

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
01	/	31	/	2019

**Transaction ID : SA11A.1638697**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

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

Mailing Address 111 BERRY CT

City CHRISTIANSBURG	State VA	Zip Code 24073
------------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2019

**Transaction ID : SA11A.1641084**

Amount of Each Receipt this Period  
300.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. TOOHEY, MARY, HOLLY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 144 E KNIGHTON PL  
 City ELMHURST State IL Zip Code 60126-5102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) FLIGHT ATTENDANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 05 / 2019  
**Transaction ID : SA11A.1627250**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. TORRES, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16280 LONDON COURT  
 City RIVERSIDE State CA Zip Code 92504-5751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) BAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 03 / 2019  
**Transaction ID : SA11A.1626229**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. TORRES, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16280 LONDON COURT  
 City RIVERSIDE State CA Zip Code 92504-5751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) BAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : SA11A.1636347**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<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 82 OF 116
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**The Committee To Defend The President**

**A. TORRES, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16280 LONDON COURT  
 City RIVERSIDE State CA Zip Code 92504-5751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) BAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : SA11A.1641453**  
 Amount of Each Receipt this Period 150.00  
 Memo Item CONTRIBUTION

**B. TRACEY, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15504 STORM DR.  
 City AUSTIN State TX Zip Code 78734-2771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GSI Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 07 / 2019  
**Transaction ID : SA11A.1629030**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. TRACEY, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15504 STORM DR.  
 City AUSTIN State TX Zip Code 78734-2771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GSI Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631468**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<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 83 OF 116
	<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)  
**The Committee To Defend The President**

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

Mailing Address 5603 BROADWAY

City SAN ANTONIO	State TX	Zip Code 78209-5719
---------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) DESIGNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 27 / 2019  
**Transaction ID : SA11A.1636183**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672-4847
-------------------	-------------	------------------------

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

Name of Employer (for Individual) STEWART PETERSON GROUP INS	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 02 / 2019  
**Transaction ID : SA11A.1626202**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C. VOGEL, CLAUDETTE, D., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2922 COMISTAS DRIVE

City WALNUT CREEK	State CA	Zip Code 94598-4554
----------------------	-------------	------------------------

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 ▼  
475.00

Date of Receipt  
01 / 03 / 2019  
**Transaction ID : SA11A.1626605**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 116
	<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)  
**The Committee To Defend The President**

**A. VOGEL, CLAUDETTE, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 COMISTAS DRIVE  
 City WALNUT CREEK State CA Zip Code 94598-4554  
 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 ▼ 475.00

Date of Receipt 01 / 04 / 2019  
**Transaction ID : SA11A.1626975**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. VOGEL, CLAUDETTE, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 COMISTAS DRIVE  
 City WALNUT CREEK State CA Zip Code 94598-4554  
 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 ▼ 475.00

Date of Receipt 01 / 08 / 2019  
**Transaction ID : SA11A.1629636**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**C. VOGEL, CLAUDETTE, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 COMISTAS DRIVE  
 City WALNUT CREEK State CA Zip Code 94598-4554  
 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 ▼ 475.00

Date of Receipt 01 / 09 / 2019  
**Transaction ID : SA11A.1630612**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 85 OF 116
	<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)  
**The Committee To Defend The President**

**A. VOGEL, CLAUDETTE, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 COMISTAS DRIVE  
 City WALNUT CREEK State CA Zip Code 94598-4554  
 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 ▼ 475.00

Date of Receipt 01 / 18 / 2019  
**Transaction ID : SA11A.1633795**  
 Amount of Each Receipt this Period 75.00  
 Memo Item CONTRIBUTION

**B. VOGEL, CLAUDETTE, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 COMISTAS DRIVE  
 City WALNUT CREEK State CA Zip Code 94598-4554  
 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 ▼ 475.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1640277**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. WAGNER, CHARLOTTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1770 KING AVENUE  
 City NAPA State CA Zip Code 94559-1565  
 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 ▼ 230.00

Date of Receipt 01 / 11 / 2019  
**Transaction ID : SA11A.1631889**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 86 OF 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**The Committee To Defend The President**

**A. WAGNER, CHARLOTTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1770 KING AVENUE  
 City NAPA State CA Zip Code 94559-1565  
 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 ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2019  
**Transaction ID : SA11A.1634613**  
 Amount of Each Receipt this Period 5.00  
 Memo Item CONTRIBUTION

**B. WAGNER, CHARLOTTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1770 KING AVENUE  
 City NAPA State CA Zip Code 94559-1565  
 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 ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : SA11A.1640273**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. WAGNER, CHARLOTTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1770 KING AVENUE  
 City NAPA State CA Zip Code 94559-1565  
 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 ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : SA11A.1640274**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<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 87 OF 116
	<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)  
**The Committee To Defend The President**

**A. WAGNER, MISTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 7307  
 City CUT AND SHOOT State TX Zip Code 77306-0307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SEPCO SEPTIC Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2019  
**Transaction ID : SA11A.1632471**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. WHITE, CARROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1302 N BENJAMIN ST  
 City STILLWATER State OK Zip Code 74075-5701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : SA11A.1638998**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. ZERRUSEN, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 902 WEST MAIN STREET  
 City TEUTOPOLIS State IL Zip Code 62467-1329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THREE Z PRINTING Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 26 / 2019  
**Transaction ID : SA11A.1636169**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	48832.75

**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 88 OF 116
<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

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)  
**The Committee To Defend The President**

**A. CAMPAIGN SOLUTIONS**

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

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

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 ▼  
1033.70

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	09	/	2019

**Transaction ID : SA15.150144**

Amount of Each Receipt this Period  
1033.70

Memo Item  
REFUND OF LIST RENTAL FEES

**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	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

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	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1033.70
<b>TOTAL</b> This Period (last page this line number only).....	1033.70



**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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. ALEXPROP LLC**

Mailing Address 9060 FIG STREET

City ARVADA State CO Zip Code 80005

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I1500**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALEXPROP LLC**

Mailing Address 9060 FIG STREET

City ARVADA State CO Zip Code 80005

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I1500**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BEST GUEST MEDIA**

Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement MEDIA SERVICES

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I1500**  
 Amount of Each Disbursement this Period  
 3500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5500.00

**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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement DIGITAL MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period  
62.06

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE SOFTWARE FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I15014  
Amount of Each Disbursement this Period  
300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. EDONATION**

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period  
17204.57

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

17266.63

**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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. ELAVON, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	9

Mailing Address TWO CONCOURSE PARKWAY  
STE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAYMENT PROCESSING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

[REDACTED] 2236.95

Memo Item

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

**B. OLYMPIC MEDIA LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	1	9

Mailing Address 2402 POTOMAC AVE  
#102

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

[REDACTED] 73.50

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

**C. OLYMPIC MEDIA LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

Mailing Address 2402 POTOMAC AVE  
#102

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
FUNDRAISING FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

[REDACTED] 280.00

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[REDACTED] 2590.45

[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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. PAC MANAGEMENT SERVICES LLC**

Mailing Address 950 N WASHINGTON ST.  
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FEC COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAC MANAGEMENT SERVICES LLC**

Mailing Address 950 N WASHINGTON ST.  
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FEC COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. POLITICAL LIST BROKERS, LLC**

Mailing Address 107 S. WEST ST  
PMB 826

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
DATA SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

10500.00

**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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. POLITICAL.LAW**

Mailing Address 441 NORTH LEE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1500'  
Amount of Each Disbursement this Period  
6000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. POLITICAL.LAW**

Mailing Address 441 NORTH LEE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 23 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1500'  
Amount of Each Disbursement this Period  
15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. POLITICAL.LAW**

Mailing Address 441 NORTH LEE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I1500'  
Amount of Each Disbursement this Period  
6000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

27000.00

**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

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. POLITICAL.LAW**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	1	9

Mailing Address 441 NORTH LEE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REIMBURSEMENTS (SEE BELOW)

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15014  
Amount of Each Disbursement this Period

[REDACTED] 835.83

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. STAMPS.COM**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	1	9

Mailing Address 1990 E. GRAND AVE

City EL SEGUNDO State CA Zip Code 90245

Purpose of Disbursement  
POSTAGE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15014  
Amount of Each Disbursement this Period

[REDACTED] 535.83

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZENICA LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	1	9

Mailing Address 25 HIGH STREET  
#507

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement  
PR SERVICES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1500  
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 5835.83

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

[REDACTED] 68692.91

**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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial) <b>A. ARTHUR, JON, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2019	
Mailing Address P.O. BOX 450135		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I15027</b> Amount of Each Disbursement this Period 50.00	
City GROVE	State OK	Zip Code 74345	Category/ Type
Purpose of Disbursement REFUND OF CONTRIBUTION			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. ARTHUR, JON, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2019	
Mailing Address P.O. BOX 450135		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I15027</b> Amount of Each Disbursement this Period 50.00	
City GROVE	State OK	Zip Code 74345	Category/ Type
Purpose of Disbursement REFUND OF CONTRIBUTION			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. ARTHUR, JON, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2019	
Mailing Address P.O. BOX 450135		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I15027</b> Amount of Each Disbursement this Period 50.00	
City GROVE	State OK	Zip Code 74345	Category/ Type
Purpose of Disbursement REFUND OF CONTRIBUTION			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	150.00
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)  
**A. ARTHUR, JON, , ,**

Mailing Address P.O. BOX 450135

City GROVE State OK Zip Code 74345

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 17 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : SB28A.I1502**  
Amount of Each Disbursement this Period: [ ] 35.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ARTHUR, JON, , ,**

Mailing Address P.O. BOX 450135

City GROVE State OK Zip Code 74345

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 17 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : SB28A.I1502**  
Amount of Each Disbursement this Period: [ ] 35.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ARTHUR, JON, , ,**

Mailing Address P.O. BOX 450135

City GROVE State OK Zip Code 74345

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 17 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : SB28A.I1502**  
Amount of Each Disbursement this Period: [ ] 35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 105.00

**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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

**A. LEE, DOYLE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 57 RUE GRAND DR.

City LAKE SAINT LOUIS State MO Zip Code 63367

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2019

FEC Identification Number: C

Transaction ID : SB28A.I1502

Amount of Each Disbursement this Period: 5400.00

Memo Item

**B. LEMONS, SARAH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 915 IRON WORKS ROAD

City REIDSVILLE State NC Zip Code 27320

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB28A.I1501

Amount of Each Disbursement this Period: 100.00

Memo Item

**C. LEMONS, SARAH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 915 IRON WORKS ROAD

City REIDSVILLE State NC Zip Code 27320

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB28A.I1501

Amount of Each Disbursement this Period: 100.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5600.00

**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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial) <b>A. LEMONS, SARAH, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2019
Mailing Address 915 IRON WORKS ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I1501!</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City REIDSVILLE	State NC	Zip Code 27320
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type [REDACTED]
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. MICIAK, PEDRO, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 11818 RAINY OAKS DR.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I1502!</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City MAGNOLIA	State TX	Zip Code 77354
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type [REDACTED]
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. MICIAK, PEDRO, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 11818 RAINY OAKS DR.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB28A.I1502!</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City MAGNOLIA	State TX	Zip Code 77354
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type [REDACTED]
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).....▶	[REDACTED] 300.00
<b>TOTAL</b> 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

**A. MICIAC, PEDRO, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 11818 RAINY OAKS DR.

City MAGNOLIA State TX Zip Code 77354

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 04 / 2019

FEC Identification Number: C

Transaction ID : SB28A.I1502

Amount of Each Disbursement this Period: 100.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6255.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial) <b>A. DELANO, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2019	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [ ] <b>Transaction ID : SB29.I149999</b> Amount of Each Disbursement this Period [ ] 300.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type [ ]
Purpose of Disbursement CAREY ACCT: MEDIA SERVICES		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. DELANO, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2019	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [ ] <b>Transaction ID : SB29.I150000</b> Amount of Each Disbursement this Period [ ] 250.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type [ ]
Purpose of Disbursement CAREY ACCT: MEDIA SERVICES		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. DELANO, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [ ] <b>Transaction ID : SB29.I150000</b> Amount of Each Disbursement this Period [ ] 500.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type [ ]
Purpose of Disbursement CAREY ACCT: MEDIA SERVICES		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:			

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[ ] 1050.00
[ ]

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial) <b>A. DELANO, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2019	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.I150002</b> Amount of Each Disbursement this Period 100.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type
Purpose of Disbursement CAREY ACCT: MEDIA SERVICES		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. HARVEY, TED, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2019	
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.I150317</b> Amount of Each Disbursement this Period 2500.00	
City HIGHLANDS RANCH	State CO	Zip Code 80126	Category/ Type
Purpose of Disbursement CAREY ACCT: PAYROLL		Memo Item <input checked="" type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. HARVEY, TED, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019	
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.I15032</b> Amount of Each Disbursement this Period 2500.00	
City HIGHLANDS RANCH	State CO	Zip Code 80126	Category/ Type
Purpose of Disbursement CAREY ACCT: PAYROLL		Memo Item <input checked="" type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

**A. WALTERS, SETH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7500 WOODSIDE LANE  
APT 24

City LORTON State VA Zip Code 22079

Purpose of Disbursement CAREY ACCT: PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB29.I150318

Amount of Each Disbursement this Period: 2625.00

Memo Item

**B. WALTERS, SETH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7500 WOODSIDE LANE  
APT 24

City LORTON State VA Zip Code 22079

Purpose of Disbursement CAREY ACCT: PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 29 / 2019

FEC Identification Number: C

Transaction ID : SB29.I150322

Amount of Each Disbursement this Period: 2625.00

Memo Item

**C. DCXL INC**

Full Name (Last, First, Middle Initial)

Mailing Address 250 EXCHANGE PL  
# B

City HERNDON State VA Zip Code 20170

Purpose of Disbursement CAREY ACCT: PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB29.I150311

Amount of Each Disbursement this Period: 7121.14

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

7121.14

7121.14

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**The Committee To Defend The President**

Full Name (Last, First, Middle Initial)

**A. DCXL INC**

Mailing Address 250 EXCHANGE PL  
# B

City HERNDON State VA Zip Code 20170

Purpose of Disbursement  
CAREY ACCT: PAYROLL PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
01 / 14 / 2019

FEC Identification Number

C   
**Transaction ID : SB29.I150319**  
Amount of Each Disbursement this Period  
 1996.14

Memo Item

Full Name (Last, First, Middle Initial)

**B. DCXL INC**

Mailing Address 250 EXCHANGE PL  
# B

City HERNDON State VA Zip Code 20170

Purpose of Disbursement  
CAREY ACCT: PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
01 / 29 / 2019

FEC Identification Number

C   
**Transaction ID : SB29.I150320**  
Amount of Each Disbursement this Period  
 7121.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. DCXL INC**

Mailing Address 250 EXCHANGE PL  
# B

City HERNDON State VA Zip Code 20170

Purpose of Disbursement  
CAREY ACCT: PAYROLL PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
01 / 29 / 2019

FEC Identification Number

C   
**Transaction ID : SB29.I15032:**  
Amount of Each Disbursement this Period  
 1996.14

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

7121.14  
 15392.28

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 104 OF 116
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**The Committee To Defend The President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign HQ</b>		Nature of Debt (Purpose): Phone Voter Contact	
Mailing Address PO Box 257			
City Brooklyn	State IA	Zip Code 52211	

Outstanding Balance Beginning This Period 14919.15	<b>Transaction ID : 18.12b</b>	
Amount Incurred This Period 0.00	Payment This Period 14919.15	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Solutions</b>		Nature of Debt (Purpose): Online Voter Contact	
Mailing Address 117 N SAINT ASAPH ST.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 8294.18	<b>Transaction ID : 18.12a</b>	
Amount Incurred This Period 0.00	Payment This Period 8294.18	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>INFOCISION MANAGEMENT CORPORATION</b>		Nature of Debt (Purpose): Phone Voter Contact	
Mailing Address P.O. BOX 932441			
City CLEVELAND	State OH	Zip Code 44193	

Outstanding Balance Beginning This Period 663.50	<b>Transaction ID : 18.12c</b>	
Amount Incurred This Period 0.00	Payment This Period 663.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CAMPAIGN SOLUTIONS
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ESTIMATED JANUARY LIST RENTAL FEES
Name of Federal Candidate: TRUMP, DONALD, J,
Calendar Year-To-Date Per Election for Office Sought 363901.02
Date of Public Distribution/Dissemination 01/01/2019
Amount 30000.00
Transaction ID : SE24.149580
Date of Disbursement or Obligation 01/01/2019
Office Sought: President
Disbursement For: General 2020

Full Name of Payee CAMPAIGN SOLUTIONS
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ESTIMATED JANUARY ONLINE DISTRIBUTION COSTS
Name of Federal Candidate: TRUMP, DONALD, J,
Calendar Year-To-Date Per Election for Office Sought 363901.02
Date of Public Distribution/Dissemination 01/01/2019
Amount 15000.00
Transaction ID : SE24.149579
Date of Disbursement or Obligation 01/01/2019
Office Sought: President
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 01/01/2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CAMPAIGN SOLUTIONS
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ESTIMATED JANUARY ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J,
Calendar Year-To-Date Per Election for Office Sought 363901.02
Date of Public Distribution/Dissemination 01/01/2019
Amount 11000.00
Transaction ID : SE24.149578
Date of Disbursement or Obligation 01/01/2019
Office Sought: President
Disbursement For: General 2020

Full Name of Payee CONNELL DONATELLI, INC.
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ESTIMATED JANUARY ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J,
Calendar Year-To-Date Per Election for Office Sought 363901.02
Date of Public Distribution/Dissemination 01/01/2019
Amount 2000.00
Transaction ID : SE24.149581
Date of Disbursement or Obligation 01/01/2019
Office Sought: President
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 01/01/2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: FACEBOOK, INC.
Mailing Address: 1 HACKER WAY
City: MENLO PARK, State: CA, Zip Code: 94025
Purpose of Expenditure: ESTIMATED JANUARY ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J., Support
Date of Public Distribution/Dissemination: 01/01/2019
Amount: 500.00
Transaction ID: SE24.149582
Date of Disbursement or Obligation: 01/01/2019
Name of Federal Candidate: TRUMP, DONALD, J., Support
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 363901.02

Full Name of Payee: RIGHT COUNTRY LISTS
Mailing Address: 117 NORTH SAINT ASAPH STREET
City: ALEXANDRIA, State: VA, Zip Code: 22314
Purpose of Expenditure: ESTIMATED JANUARY ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J., Support
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 363901.02
Date of Public Distribution/Dissemination: 01/01/2019
Amount: 1000.00
Transaction ID: SE24.149584
Date of Disbursement or Obligation: 01/01/2019

(a) SUBTOTAL of Itemized Independent Expenditures ..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 01/01/2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
CAMPAIGN HQ
Mailing Address
P.O. BOX 257
City
BROOKLYN State
IA Zip Code
52211
Purpose of Expenditure
ESTIMATED JANUARY PHONE VOTER CONTACT
Category/Type

Date of Public Distribution/Dissemination
01 / 01 / 2019
Amount
44000.00
Transaction ID : SE24.149577
Date of Disbursement or Obligation
01 / 01 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support
Oppose
Office Sought:
President
Senate
State:
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
INFOCISION MANAGEMENT CORPORATION
Mailing Address
P.O. BOX 932441
City
CLEVELAND State
OH Zip Code
44193
Purpose of Expenditure
ESTIMATED JANUARY PHONE VOTER CONTACT
Category/Type

Date of Public Distribution/Dissemination
01 / 01 / 2019
Amount
6000.00
Transaction ID : SE24.149583
Date of Disbursement or Obligation
01 / 01 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support
Oppose
Office Sought:
President
Senate
State:
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 01 / 01 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: RRTVMEDIA, LLC
Memo Item
Date of Public Distribution/Dissemination: 01/01/2019
Amount: 10000.00
Transaction ID: SE24.149585
Date of Disbursement or Obligation: 01/01/2019
Purpose of Expenditure: ESTIMATED JANUARY TELEVISION ADVERTISING
Category/Type
Name of Federal Candidate: TRUMP, DONALD, J,
Support
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 363901.02

Full Name of Payee: RIGHT COUNTRY LISTS
Memo Item
Date of Public Distribution/Dissemination: 01/09/2019
Amount: 19800.00
Transaction ID: SE24.149621
Date of Disbursement or Obligation: 01/09/2019
Purpose of Expenditure: LIST RENTAL
Category/Type
Name of Federal Candidate: TRUMP, DONALD, J,
Support
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 363901.02

(a) SUBTOTAL of Itemized Independent Expenditures 19800.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 01/01/2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CAMPAIGN SOLUTIONS
SEE ESTIMATED JANUARY LIST RENTAL FEES TRANSACTION ID# SE24.149580
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure LIST RENTAL FEES
Category/Type
Date of Public Distribution/Dissemination 01/01/2019
Amount 55861.10
Transaction ID : SE24.150146
Date of Disbursement or Obligation 01/31/2019

Name of Federal Candidate: TRUMP, DONALD, J,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee CAMPAIGN SOLUTIONS
SEE ESTIMATED JAN ONLINE DISTRIB COSTS TRANSACTION ID# SE24.149579
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ONLINE DISTRIBUTION COSTS
Category/Type
Date of Public Distribution/Dissemination 01/01/2019
Amount 27508.16
Transaction ID : SE24.150145
Date of Disbursement or Obligation 01/31/2019

Name of Federal Candidate: TRUMP, DONALD, J,
Support Oppose
Office Sought: House Senate State:
President
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 83369.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 02/18/2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CAMPAIGN SOLUTIONS
SEE ESTIMATES SE24.149529 AND SE24.149538
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Office Sought: President
Disbursement For: General 2020
Amount 8294.18
Transaction ID : SE24.149817
Date of Disbursement or Obligation 01/10/2019

Full Name of Payee RIGHT COUNTRY LISTS
SEE ESTIMATE TRANSACTION ID# SE24.149584
Mailing Address 117 NORTH SAINT ASAPH STREET
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure ONLINE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Office Sought: President
Disbursement For: General 2020
Amount 12500.00
Transaction ID : SE24.149926
Date of Disbursement or Obligation 01/24/2019

(a) SUBTOTAL of Itemized Independent Expenditures 20794.18
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 12/01/2018

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>The Committee To Defend The President</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00544767
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>RIGHT COUNTRY LISTS</b> OVERRUN OF BUDGET FOR TRANSACTION ID# SE24.149584	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 117 NORTH SAINT ASAPH STREET	Amount <input type="text"/>
City ALEXANDRIA State VA Zip Code 22314	<b>Transaction ID : SE24.149938</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure ONLINE VOTER CONTACT Category/Type <input type="text"/>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 363901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>CAMPAIGN HQ</b> SEE ESTIMATE TRANSACTION ID# SE24.149577	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. BOX 257	Amount <input type="text"/>
City BROOKLYN State IA Zip Code 52211	<b>Transaction ID : SE24.149590</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure PHONE VOTER CONTACT Category/Type <input type="text"/>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 363901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 16456.97
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date  /  /

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
CAMPAIGN HQ
SEE ESTIMATE SE24.149537
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure
PHONE VOTER CONTACT
Category/Type

Date of Public Distribution/Dissemination
12 / 21 / 2018
Amount
14919.15
Transaction ID : SE24.149816
Date of Disbursement or Obligation
01 / 07 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support Oppose
Office Sought: House Senate State:
President

Disbursement For: Primary General
2020 Other (specify)

Full Name of Payee
CAMPAIGN HQ
SEE ESTIMATE TRANSACTION ID# SE24.149577
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure
PHONE VOTER CONTACT
Category/Type

Date of Public Distribution/Dissemination
01 / 08 / 2019
Amount
50000.00
Transaction ID : SE24.149591
Date of Disbursement or Obligation
01 / 08 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support Oppose
Office Sought: House Senate State:
President

Disbursement For: Primary General
2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 64919.15
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 12 / 21 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: CAMPAIGN HQ
Mailing Address: P.O. BOX 257
City: BROOKLYN, State: IA, Zip Code: 52211
Purpose of Expenditure: PHONE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Date of Public Distribution/Dissemination: 01/26/2019
Amount: 12064.20
Transaction ID: SE24.149936
Date of Disbursement or Obligation: 01/28/2019
Disbursement For: General 2020

Full Name of Payee: CAMPAIGN HQ
Mailing Address: P.O. BOX 257
City: BROOKLYN, State: IA, Zip Code: 52211
Purpose of Expenditure: PHONE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Date of Public Distribution/Dissemination: 01/28/2019
Amount: 50000.00
Transaction ID: SE24.149937
Date of Disbursement or Obligation: 01/28/2019
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 62064.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 01/28/2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
INFOCISION MANAGEMENT CORPORATION
SEE ESTIMATE SE24.149543
Mailing Address P.O. BOX 932441
City CLEVELAND State OH Zip Code 44193
Purpose of Expenditure PHONE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Office Sought: President
Disbursement For: General 2020
Amount 663.50
Transaction ID : SE24.149815
Date of Disbursement or Obligation 01/03/2019

Full Name of Payee
INFOCISION MANAGEMENT CORPORATION
SEE ESTIMATE TRANSACTION ID# SE24.149583
Mailing Address P.O. BOX 932441
City CLEVELAND State OH Zip Code 44193
Purpose of Expenditure PHONE VOTER CONTACT
Name of Federal Candidate: TRUMP, DONALD, J, , Support
Office Sought: President
Disbursement For: General 2020
Amount 123.95
Transaction ID : SE24.149622
Date of Disbursement or Obligation 01/10/2019

(a) SUBTOTAL of Itemized Independent Expenditures 787.45
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 12/22/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Committee To Defend The President
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
INFOCISION MANAGEMENT CORPORATION
SEE ESTIMATE TRANSACTION ID# SE24.149583

Date of Public Distribution/Dissemination
01 / 16 / 2019

Mailing Address
P.O. BOX 932441

Amount
63.43

City State Zip Code
CLEVELAND OH 44193

Transaction ID : SE24.149765

Purpose of Expenditure
PHONE VOTER CONTACT
Category/Type

Date of Disbursement or Obligation
01 / 16 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support Oppose

Office Sought:
House Senate
President State:

Calendar Year-To-Date
Per Election for Office Sought
363901.02

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
INFOCISION MANAGEMENT CORPORATION
SEE ESTIMATE TRANSACTION ID# SE24.149583

Date of Public Distribution/Dissemination
01 / 15 / 2019

Mailing Address
P.O. BOX 932441

Amount
23.21

City State Zip Code
CLEVELAND OH 44193

Transaction ID : SE24.149927

Purpose of Expenditure
PHONE VOTER CONTACT
Category/Type

Date of Disbursement or Obligation
01 / 24 / 2019

Name of Federal Candidate:
TRUMP, DONALD, J, ,
Support Oppose

Office Sought:
House Senate
President State:

Calendar Year-To-Date
Per Election for Office Sought
363901.02

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 86.64
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 268277.85

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , [Electronically Filed] Date 01 / 16 / 2019
Signature