

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

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

FOR LINE NUMBER: PAGE 61 OF 1401

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

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

A. ADKISON, DAVID, , ,

Mailing Address 410 NEUCHATEL ROAD

City
NEW BERN

State
NC

Zip Code
28562-7066

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 Y Y
 06 / 05 / 2017

Transaction ID : SA17.951332

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ADKISSON, MARK, , ,

Mailing Address 5652 HUNT CLUB DR.

City
FONTANA

State
CA

Zip Code
92336-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOSHIBA AMERICA MEDICAL SYSTEMS

Occupation (for Individual)
IMAGING SUPPORT ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 05 / 2017

Transaction ID : SA17.939752

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ADLEY, DONALD, , ,

Mailing Address 62 WATERSIDE LANE

City
CLINTON

State
CT

Zip Code
06413-2141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ARCHITECTURAL DESIGN AND BUIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 05 / 2017

Transaction ID : SA17.937681

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

200.00

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