

**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)

203 South Union Street

Ste 300

Check if different
than previously
reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00544767

3. IS THIS
REPORTNEW
(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 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 Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The Committee To Defend The President

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
05 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		1559332.27
(b) Cash on Hand at Beginning of Reporting Period.....	1635769.12	
(c) Total Receipts (from Line 19)	388940.44	1546245.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2024709.56	3105577.97
7. Total Disbursements (from Line 31).....	395572.64	1476441.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1629136.92	1629136.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	22000.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

The Committee To Defend The President

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 05 / 01 / 2018

To:

 M M / D D / Y Y Y Y
 05 / 31 / 2018
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15859.00

51864.00

(ii) Unitemized

86020.20

329381.19

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

101879.20

381245.19

(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)

101879.20

381245.19

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).....

1327.95

16230.14

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

285733.29

1148770.37

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))

388940.44

1546245.70

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

388940.44

1546245.70

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	4310.54	10226.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4310.54	10226.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12207.00	23207.00
24. Independent Expenditures (use Schedule E)	276677.38	964755.43
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	11129.00	67305.00
(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)).....	11129.00	67305.00
29. Other Disbursements (Including Non-Federal Donations).....	91248.72	410947.34
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)) ..	395572.64	1476441.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	395572.64	1476441.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	101879.20	381245.19
34. Total Contribution Refunds (from Line 28(d))	11129.00	67305.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90750.20	313940.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4310.54	10226.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1327.95	16230.14
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2982.59	- 6003.86

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5 HCB
.

Form/Schedule: F3XA

Transaction ID :

This letter is in response to the Commissions Request for Additional information dated October 24, 2018 regarding the 2018 June Monthly report. All items in question all clearly identify in memo text they link to estimates filed on April 30, 2018. The committee was advised by the Commission to file estimates in this way as these projects deploy throughout the month and exact dissemination dates and amounts are not known in advance and sometimes billed by the vendor much later than the reporting period. Also, the address the Commission is sending these letters to is incorrect. Please see the amended Statement of Organization filed on August 1, 2018 and update your records accordingly. This amendment also updates cash on hand calculations from prior amendments. Previous memo text: Items from the monthly estimate Independent Expenditure report filed on 4/30/18 (FEC-1228217) not appearing on this report have not yet been invoiced by the vendor, and will be reported when invoiced/paid, or the committee ultimately did not spend funds planned and budgeted for that activity.

Form/Schedule:

Transaction ID:

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

FOR LINE NUMBER: PAGE 7 OF 610

(check only one)

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

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

NAME OF COMMITTEE (In Full)

The Committee To Defend The President

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

A. ANDERSON, GAIL, , ,

Mailing Address 416 UNION AVENUE

City
SARATOGA SPRINGSState
NYZip Code
12866-6422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		11		2018

Transaction ID : SA11A.1208032

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. ARCHER, LYNNE, , ,

Mailing Address 20 SAINT PETERS WALK

City
SUGAR LANDState
TXZip Code
77479-2525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARCHER KIA & BOAT WAGONOccupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Transaction ID : SA11A.1209202

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

C. ASFELD, KATHRYN, , ,

Mailing Address 305 NELSON DRIVE

City
FLORENCEState
SDZip Code
57235-2155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2018

Transaction ID : SA11A.1224884

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION
EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

905.00

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

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

FOR LINE NUMBER: PAGE 8 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. AURICH, WILLIAM, , ,

Mailing Address 770 BRI

City
SEQUIMState
WAZip Code
98382FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PYSCIENOccupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA11A.1208920

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. BANKS, JOAN, , ,

Mailing Address 50 PIERCE AVE

City
LAKEVILLEState
MAZip Code
02347-1801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05 / 23 / 2018

Transaction ID : SA11A.1224874

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. BAUM, KAREN, , ,

Mailing Address 130 LA FLORICITA

City
PISMO BEACHState
CAZip Code
93449-2847FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y Y
05 / 02 / 2018

Transaction ID : SA11A.1208361

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 9 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. BECK, MYRNA, , ,

Mailing Address 5-18 ESTLER COURT

City
FAIR LAWN

State
NJ

Zip Code
07410-4003

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 ▼

94.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224906

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. BHARGAVA, AJIT, , ,

Mailing Address 4785 BLUE MOUNTAIN DR.

City
YORBA LINDA

State
CA

Zip Code
92887-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA11A.1207532

Amount of Each Receipt this Period

201.00

☐ Memo Item
CONTRIBUTION

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

C. BOULDIN, VICKIE, , ,

Mailing Address 707 CREEK FOREST CIRCLE

City
SPRING

State
TX

Zip Code
77380-2283

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA11A.1208068

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

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

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

251.00

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

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

FOR LINE NUMBER: PAGE 10 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. BOWEN, GARY, , ,

Mailing Address 1078 SW 4TH AVE

City
MILL CITYState
ORZip Code
97360-2506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11A.1224915

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBOROState
MAZip Code
02760-1910FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2018

Transaction ID : SA11A.1207363

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BURGIN, BARBARA, , ,

Mailing Address P.O. BOX 832

City
FULSHEARState
TXZip Code
77441-0832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11A.1208196

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

445.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. BURROWS, KELLY, , ,

Mailing Address P.O. BOX 328

City
 GLEND0

State
 WY

Zip Code
 82213-0328

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RANCHER

Occupation (for Individual)
 SELF EMPLOYED

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
 05 / 02 / 2018

Transaction ID : SA11A.1207910

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

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

B. BURROWS, KELLY, , ,

Mailing Address P.O. BOX 328

City
 GLEND0

State
 WY

Zip Code
 82213-0328

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RANCHER

Occupation (for Individual)
 SELF EMPLOYED

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
 05 / 04 / 2018

Transaction ID : SA11A.1208630

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

C. BYRD, JERRY, , ,

Mailing Address 2110 T STREET SE

City
 WASHINGTON

State
 DC

Zip Code
 20020-4674

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 ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2018

Transaction ID : SA11A.1208218

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. CARLTON, GORDON, , ,

Mailing Address 69001 GORDON RD

City
CASSOPOLISState
MIZip Code
49031-8522FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05 / 30 / 2018

Transaction ID : SA11A.1208192

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. CARTER, CHRIS, , ,

Mailing Address 3881 QUARRY MOUNTAIN RD

City
PARK CITYState
UTZip Code
84098-6617FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11A.1208015

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. CHAMBERS, CYNTHIA, , ,

Mailing Address 325 MILLER RD

City
SMICKSBURGState
PAZip Code
16256-5311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OWNER/OPERATOROccupation (for Individual)
CRW HOME CENTER

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
05 / 22 / 2018

Transaction ID : SA11A.1208133

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. CLEMENTS, STEPHEN, , ,

Mailing Address 23530 HAAS AVE

City
TORRANCE

State
CA

Zip Code
90501-6057

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
05 / 03 / 2018

Transaction ID : SA11A.1207936

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. COOK, GEORGE R, , ,

Mailing Address 19 ANGELA WAY

City
NORTH SALT LAKE

State
UT

Zip Code
84054-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHOOTING SPORTS SOFTWARE

Occupation (for Individual)
SELF EMPLOYED

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
05 / 01 / 2018

Transaction ID : SA11A.1207854

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. COOPER, JERRY, , ,

Mailing Address 2194 NORTH MOCCASIN CREEK

City
CALICO ROCK

State
AR

Zip Code
72519-8913

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 ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224887

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 14 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. COUGHLIN, MICHAEL, , ,

Mailing Address 5701 OAKWOOD RD

City
PRAIRIE VILLAGE

State
KS

Zip Code
66208-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SCIPRO

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11A.1208195

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

B. COWGER, RONNIE, , ,

Mailing Address 3205 CORTEZ STREET

City
CARSON CITY

State
NV

Zip Code
89701-6112

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11A.1208385

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. CULLEN, MARLETTE, , ,

Mailing Address 873 HELEN BLEVINS RD.

City
WEST JEFFERSON

State
NC

Zip Code
28694-8317

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 ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224873

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

435.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. DICKERSON, HAZEL, , ,

Mailing Address 80 CAYUGA RD

City
LAKE ORIONState
MIZip Code
48362-1300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11A.1207962

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. DILL, ERNEST, , ,

Mailing Address 8201 WATERFORD DR.

City
SPOTSYLVANIAState
VAZip Code
22551-2210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF EMPLOYED

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
05 / 22 / 2018

Transaction ID : SA11A.1209162

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. DONLEY, ED, , ,

Mailing Address 2742 WILDERNESS RD

City
CLAY CENTERState
KSZip Code
67432-9060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SALES. RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11A.1208019

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. DOWNS, EWAN, , ,

Mailing Address 16 OCEAN STREET
1

City
LYNN

State
MA

Zip Code
01902-2023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOSTON THERAPY

Occupation (for Individual)
PHYSICAL THERAPY ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224868

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. DOWNS, EWAN, , ,

Mailing Address 16 OCEAN STREET
1

City
LYNN

State
MA

Zip Code
01902-2023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOSTON THERAPY

Occupation (for Individual)
PHYSICAL THERAPY ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224875

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. DUANE, GLEE, , ,

Mailing Address 8534 MOUNTAIN MEADOWS

City
MOUNTAIN RANCH

State
CA

Zip Code
95246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11A.1208768

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

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

1030.00

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

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

FOR LINE NUMBER: PAGE 17 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. DUCK, ANITA, , ,

Mailing Address 372 RIVERCHASE BLVD

City
CRESTVIEW

State
FL

Zip Code
32536-9217

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 ▼

11.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224883

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. EISENBERG, MARK, , ,

Mailing Address 115 RALL AVE

City
CLOVIS

State
CA

Zip Code
93612-4429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRISON SECURITY

Occupation (for Individual)
SECURITY GUARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

65.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224869

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. FETTERS, LESTER L, , ,

Mailing Address 380 E ESMOND RD

City
ROSE CITY

State
MI

Zip Code
48654-9777

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OWNER

Occupation (for Individual)
ROWE TOOL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1209229

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

508.00

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 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2018

Transaction ID : SA11A.1224901

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. FOTESCU, DINU-CONSTANTIN, , ,

Mailing Address 247 W 76TH STREET
9

City
NEW YORK

State
NY

Zip Code
10023-8249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
B & H ENGINEERING P.C.

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224908

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. FOTI, CAROL, , ,

Mailing Address P.O. BOX 1200

City
WANTAGH

State
NY

Zip Code
11793-0030

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 ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224876

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 19 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. FRANZONE, JOHN, , ,

Mailing Address 369 - STOBE AVE

City
STATEN ISLAND

State
NY

Zip Code
10306-5235

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 ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224914

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. GASPAR, JOHN, , ,

Mailing Address 164 ARLINGTON AVE

City
WARWICK

State
RI

Zip Code
02889-5151

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 ▼

6.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA11A.1224898

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. GIETZ, DELILAH, , ,

Mailing Address 136 CAMP MOREHEAD DR.

City
MOREHEAD CITY

State
NC

Zip Code
28557-2575

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
05 / 08 / 2018

Transaction ID : SA11A.1208759

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

153.00

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

FOR LINE NUMBER: PAGE 20 OF 610

(check only one)

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

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

NAME OF COMMITTEE (In Full)

The Committee To Defend The President

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

A. GONZALEZ, LEONIDAS, , ,

Mailing Address 854 MERCURY CIRCLE

City
LONE TREEState
COZip Code
80124-2617FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2018

Transaction ID : SA11A.1224877

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION
EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. GUASTELLA, ANTHONY, , ,

Mailing Address 854 LAROE RD

City
MONROEState
NYZip Code
10950-5022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2018

Transaction ID : SA11A.1209187

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRISState
TNZip Code
37828-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M	D D	Y Y Y Y
05	26	2018

Transaction ID : SA11A.1224888

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION
EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 21 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. HANNIFAN, PHYLLIS, , ,

Mailing Address P.O. BOX 1388

City
HAWTHORNE

State
NV

Zip Code
89415-1388

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 Y Y
05 / 04 / 2018

Transaction ID : SA11A.1207174

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. HANNIFAN, PHYLLIS, , ,

Mailing Address P.O. BOX 1388

City
HAWTHORNE

State
NV

Zip Code
89415-1388

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 Y Y
05 / 09 / 2018

Transaction ID : SA11A.1207742

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. HANSON, LEWIS, , ,

Mailing Address W51 N602 CEDAR RESERVE CIRCLE

City
CEDARBURG

State
WI

Zip Code
53012-2134

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
05 / 02 / 2018

Transaction ID : SA11A.1207896

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

120.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. HEARST, DAVID, , ,

Mailing Address 11455 EL CAMINO REAL
STE 305

City
SAN DIEGO

State
CA

Zip Code
92130-2088

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARO POLO

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11A.1208302

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

B. HENDRICKS, JAMES, , ,

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 ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11A.1207997

Amount of Each Receipt this Period

450.00

☐ Memo Item
CONTRIBUTION

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

C. HESKETT, JOE, , ,

Mailing Address 2449 E. 5TH STREET

City
BULLHEAD CITY

State
AZ

Zip Code
86429-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ARTISTIC DRAFTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224889

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

1475.00

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

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

FOR LINE NUMBER: PAGE 23 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. HOLT, ROBERT, , ,

Mailing Address 2028 E BEN WHITE BLVD
STE 550

City
AUSTIN

State
TX

Zip Code
78741-6966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SMALL BUSINESS OWNER

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11A.1208801

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. HOYT, GAYLORD, , ,

Mailing Address 5830 OSO PARKWAY

City

CORPUS CHRISTI

State

TX

Zip Code

78414-6046

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
05 / 14 / 2018

Transaction ID : SA11A.1208054

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

C. HUGHES, JANE, , ,

Mailing Address 209 RIVER BEND DR.

City

CHESTERFIELD

State

MO

Zip Code

63017-2632

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 ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA11A.1224880

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

705.00

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

FOR LINE NUMBER: PAGE 24 OF 610

(check only one)

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

Mailing Address 832 GREAT BEND DR.

City
DIAMOND BARState
CAZip Code
91765-2049FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M	D D	Y Y Y Y
05	26	2018

Transaction ID : SA11A.1224890

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION
EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. JUMPER, BILLY, , ,

Mailing Address 14006 WOODTHORPE LN

City
HOUSTONState
TXZip Code
77079-3241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M	D D	Y Y Y Y
05	22	2018

Transaction ID : SA11A.1209126

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. KARL, THOMAS, , ,Mailing Address 211 COMMERCE COURT
104City
NEWTOWN SQUAREState
PAZip Code
19073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHYSICIANS CHOICE DIALYSISOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M	D D	Y Y Y Y
05	22	2018

Transaction ID : SA11A.1208098

Amount of Each Receipt this Period

65.00

☐ Memo Item
CONTRIBUTION

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

140.00

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

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

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

FOR LINE NUMBER: PAGE 25 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. KING, EDITH, , ,

Mailing Address 1620 EAST 85TH STREET

City
CHICAGO

State
IL

Zip Code
60617-2237

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 ▼

135.00

Date of Receipt

05 / 31 / 2018

Transaction ID : SA11A.1224918

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. KOONCE, KENNETH M, , ,

Mailing Address P.O. BOX 927

City
LEAKEY

State
TX

Zip Code
78873-0927

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 ▼

30.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA11A.1224870

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. KOPMEIER, MARY, , ,

Mailing Address 46 BLUFF VIEW TER

City
CROSSVILLE

State
TN

Zip Code
38558-3000

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 ▼

75.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA11A.1224878

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 26 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. KUGLER, SONIA, , ,

Mailing Address 304 76TH STREET

City
NORTH BERGEN

State
NJ

Zip Code
07047-5614

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 ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11A.1224916

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. LADD, WANDA, , ,

Mailing Address 4015 S. STATE AV

City
INDIANAPOLIS

State
IN

Zip Code
46227-3676

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 ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224911

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. LANGRECK, ROGER, , ,

Mailing Address 28207 QUAIL RD

City
WEST UNION

State
IA

Zip Code
52175-9695

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 ▼

28.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224871

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 27 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. LAWS, A., , ,

Mailing Address 171 LASSEN DR.

City
SAN BRUNO

State
CA

Zip Code
94066-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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
05 / 25 / 2018

Transaction ID : SA11A.1207453

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. LECAIN, MARY ANN, , ,

Mailing Address P.O. BOX 770881
37F

City
OCALA

State
FL

Zip Code
34477-0881

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 ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224891

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. LEWITZKE, ALAN, , ,

Mailing Address P.O. BOX 249

City
MOSINEE

State
WI

Zip Code
54455-0249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA11A.1208436

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

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

1275.00

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

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

FOR LINE NUMBER: PAGE 28 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. LIFSEY, KATHARINE, , ,

Mailing Address 23217 N 119TH DRIVE

City
SUN CITY

State
AZ

Zip Code
85373-5408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOSPICE OF THE VALLEY

Occupation (for Individual)
RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

05 / 26 / 2018

Transaction ID : SA11A.1224892

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. LUEDTKE, RICHARD, , ,

Mailing Address 1219 HEATH HOLLOW DR.

City
SPRING

State
TX

Zip Code
77379-2995

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 ▼

150.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA11A.1224904

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. MAGIDOW, JOANN, , ,

Mailing Address 1445 PONTE VEDRA BLVD

City
PONTE VEDRA BEACH

State
FL

Zip Code
32082-4505

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

05 / 22 / 2018

Transaction ID : SA11A.1209152

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 29 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. MARFLAK, LYNDIA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA11A.1208081

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MARTIN, WAYNE, , ,

Mailing Address 250 REINDOLLAR AVE.

City
MARINA

State
CA

Zip Code
93933-3920

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 ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224893

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA11A.1224867

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 30 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA11A.1224919

Amount of Each Receipt this Period

245.00

☐ Memo Item
CONTRIBUTION

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

B. MCCRARY, LACY, , ,

Mailing Address 55 BEACON LITE RD

City
MONUMENT

State
CO

Zip Code
80132-4400

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
05 / 15 / 2018

Transaction ID : SA11A.1208967

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

C. MCCRARY, LACY, , ,

Mailing Address 55 BEACON LITE RD

City
MONUMENT

State
CO

Zip Code
80132-4400

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
05 / 17 / 2018

Transaction ID : SA11A.1209026

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

545.00

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

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

FOR LINE NUMBER: PAGE 31 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. MUCCINO, VANESSA, , ,

Mailing Address 8522 TOWNE MANOR CT

City
ALEXANDRIA

State
VA

Zip Code
22309-4503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHCI

Occupation (for Individual)
INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA11A.1207928

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. MUNN, RAYMOND, , ,

Mailing Address 256 LITTLE GARDEN DR.

City
NEBO

State
NC

Zip Code
28761-7793

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 ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA11A.1224900

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. NOWELL, WINFORD, , ,

Mailing Address 8 ROLLINS ST

City
GROVELAND

State
MA

Zip Code
01834-1804

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

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018

Transaction ID : SA11A.1209159

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 32 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. ORWIG, BERT, , ,

Mailing Address 2227 SCOTCH VALLEY RD

City
HOLLIDAYSBURG

State
PA

Zip Code
16648-7134

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
05 / 18 / 2018

Transaction ID : SA11A.1209080

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. PIERCE, RON, , ,

Mailing Address 9775 W IOWA DR.

City
LAKEWOOD

State
CO

Zip Code
80232-6313

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 Y Y
05 / 22 / 2018

Transaction ID : SA11A.1208147

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. PIROGOWICZ, JOHN, , ,

Mailing Address 3761 KILLDEER DRIVE

City
ANTIOCH

State
CA

Zip Code
94509-9362

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 ▼

27.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224882

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

251.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSA

State
OK

Zip Code
74101-3266

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 ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11A.1207993

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. POQUETTE, VIRGINIA, , ,

Mailing Address 5711 N US HIGHWAY 31

City
ALANSON

State
MI

Zip Code
49706-9427

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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11A.1207959

Amount of Each Receipt this Period

600.00

☐ Memo Item
CONTRIBUTION

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

C. POWELL, GLENN, , ,

Mailing Address 1816 BINDEL ST.

City
CARLSBAD

State
NM

Zip Code
88220-6503

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 / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224894

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

775.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. REISS, CLAIRE K., , ,

Mailing Address 9675 LA JOLLA FARMS ROAD

City
LA JOLLA

State
CA

Zip Code
92037-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

05 / 26 / 2018

Transaction ID : SA11A.1224897

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 29 / 2018

Transaction ID : SA11A.1224902

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. RICHARDSON, PAMELA, , ,

Mailing Address 5303 E. WILSON ST.

City
FLORENCE

State
OR

Zip Code
97439-8517

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 ▼

40.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA11A.1224909

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

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

1030.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. ROBERTSON, TRAVIS, , ,

Mailing Address 2465 ANTIOCH RD.

City
WETUMPKA

State
AL

Zip Code
36092-6236

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA11A.1207276

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

B. ROPCHOCK, ED, , ,

Mailing Address P.O. BOX 281

City
HUNTINGTON

State
TX

Zip Code
75949-0281

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OWNER OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224912

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. ROSSI, VINCENT, , ,

Mailing Address 20453 N 93RD PL

City
SCOTTSDALE

State
AZ

Zip Code
85255-6621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ICW INVESTMENT ADVISORS LLC

Occupation (for Individual)
LOAN OFFICER

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
05 / 05 / 2018

Transaction ID : SA11A.1208738

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

425.00

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. RUTHERFORD, ROBERT, , ,

Mailing Address 90 PALM TREE TER.

City
FORT MYERS

State
FL

Zip Code
33905-2827

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 ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224895

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. SAVARESE BRASINO, ANNE, , ,

Mailing Address 5026 THEALL ROAD

City
RYE

State
NY

Zip Code
10580-1445

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 / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA11A.1224917

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. SCHMIDT, SARA, , ,

Mailing Address 56 JEFFERY LN

City
DES PLAINES

State
IL

Zip Code
60018-1219

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
05 / 22 / 2018

Transaction ID : SA11A.1209124

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 37 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. SCHOFF, ROSEMARY, , ,

Mailing Address 6760 N PLACITA MANZANITA

City
TUCSON

State
AZ

Zip Code
85718-1226

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
05 / 08 / 2018

Transaction ID : SA11A.1208741

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. SPENCE, CORINNE, , ,

Mailing Address 1508 EUREKA RD

City
ROSEVILLE

State
CA

Zip Code
95661-2809

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11A.1208014

Amount of Each Receipt this Period

750.00

☐ Memo Item
CONTRIBUTION

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

C. ST JOHN, LESLIE, , ,

Mailing Address 1909 E. SEMINARY DR.
UNIT 3313

City
FORT WORTH

State
TX

Zip Code
76119-8400

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 ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224885

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

960.00

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

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

FOR LINE NUMBER: PAGE 38 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. STROM, JOHN, , ,

Mailing Address 1209 NW 7TH WAY

City
CAMASState
WAZip Code
98607-1839FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224886

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR SENATE: C00376939

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

B. SWANSON, VICTOR, , ,

Mailing Address 8 GLENMONT RD.

City

WHITEHOUSE STATION

State

NJ

Zip Code

08889-3636

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

155.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224913

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. TESSIER, HENRY, , ,

Mailing Address 174 OVERBROOK RD

City

W HARTFORD

State

CT

Zip Code

06107-3764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARTFORD BOILER INSPECTION COMPANYOccupation (for Individual)
DIRECTOR ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA11A.1208051

Amount of Each Receipt this Period

55.00

☐ Memo Item
CONTRIBUTION

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

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

90.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. THOMAS, J KARL, , ,

Mailing Address 11203 ELAM DR.
203

City
GLEN MILLS

State
PA

Zip Code
19342-2356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
J KARL THOMAS PARTNERSHIP

Occupation (for Individual)
ACCOUNTANT

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
05 / 01 / 2018

Transaction ID : SA11A.1208296

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. TOZZI, JOHN, , ,

Mailing Address 270 PEARL ST
102

City
JACKSON

State
WY

Zip Code
83001-5300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAMBRIDGE INVESTMENTS LLC

Occupation (for Individual)
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224896

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C. TRUITT, WILLIAM, , ,

Mailing Address 3700 N CAPITAL ST. NW
1411, #21

City
WASHINGTON

State
DC

Zip Code
20011-8400

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 ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224872

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

305.00

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

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

FOR LINE NUMBER: PAGE 40 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. TRUITT, WILLIAM, , ,

Mailing Address 3700 N CAPITAL ST. NW
1411, #21

City
WASHINGTON

State
DC

Zip Code
20011-8400

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 ▼

15.00

Date of Receipt

05 / 27 / 2018

Transaction ID : SA11A.1224899

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

B. VANECK, ROSALIE, , ,

Mailing Address 827 SUGAR CREEK CIRCLE

City
NASHVILLE

State
TN

Zip Code
37214-3364

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 ▼

7.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA11A.1224905

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. VILLARREAL, HECTOR, , ,

Mailing Address 8622 CHEVIOT HEIGHTS

City
SAN ANTONIO

State
TX

Zip Code
78254-2302

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 ▼

20.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA11A.1224910

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

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

26.00

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

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

FOR LINE NUMBER: PAGE 41 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. WALSH, JAMES, , ,

Mailing Address 848 RUE DR.

City
CHARLESTON

State
SC

Zip Code
29414-7929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US CITIZEN

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA11A.1207297

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. WARBRICK, GYME, , ,

Mailing Address 408 DOGWOOD PL.

City
GRIFFIN

State
GA

Zip Code
30223-7126

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 ▼

10.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA11A.1224907

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

C. WATKINS, FRANK, , ,

Mailing Address 510 OTTO POLK RD

City
FROSTPROOF

State
FL

Zip Code
33843-9423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
D.WATKINSLLC

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 07 / 2018

Transaction ID : SA11A.1207970

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 42 OF 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. WILCOX, CAROLYN, , ,

Mailing Address 2015 RIVER DR. N

City
MULLENS

State
WV

Zip Code
25882-1617

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 / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11A.1207965

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. WILSON, ANTHONY, , ,

Mailing Address 200 SOMERSET DRIVE

City
CENTRE HALL

State
PA

Zip Code
16828-7820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NITTANY CHRISTIAN SCHOOL

Occupation (for Individual)
HEADMASTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11A.1208029

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. WOOD, MILTON, , ,

Mailing Address 1082 KUBLI RD

City
GRANTS PASS

State
OR

Zip Code
97527-8628

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 ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA11A.1224881

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

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

175.00

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 610

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. **ZELLERS, ROBERT, , ,**

Mailing Address 2252 FOX RUN CIRCLE

City
FINDLAY

State
OH

Zip Code
45840-7488

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 ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA11A.1224903

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939. FORWARDED NEXT PERIOD.

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

B. **ZUCKER, DANIEL, , ,**

Mailing Address 37 HELMS MILL RD

City
HACKETTSTOWN

State
NJ

Zip Code
07840-4173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEMPLE HATIKVAH

Occupation (for Individual)
RABBI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA11A.1224879

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED CONTRIBUTION FOR MARSHA FOR
SENATE: C00376939

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

45.00

15859.00

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

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

FOR LINE NUMBER: PAGE 44 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 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. EDONATION

Mailing Address 117 NORTH 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 ▼

6341.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA15.118767

Amount of Each Receipt this Period

836.10

☐ Memo Item

REFUND OF LIST RENTAL FEES

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

B. EDONATION

Mailing Address 117 NORTH 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 ▼

6341.10

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA15.118768

Amount of Each Receipt this Period

491.85

☐ Memo Item

REFUND OF LIST RENTAL FEES

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1327.95

1327.95

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

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

FOR LINE NUMBER: PAGE 45 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ABAIR, TERRY, , ,

Mailing Address 21 E. 6TH ST., UNIT 420

City
TEMPE

State
AZ

Zip Code
85281-3687

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
05 / 01 / 2018

Transaction ID : SA17.1209776

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ABBOTT, ROBERT, , ,

Mailing Address 13611 171ST AVE NE

City

REDMOND

State

WA

Zip Code

98052-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211648

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ABRAIN, EDMOND, , ,

Mailing Address 1401 LAKE LOTELA DRIVE

City

AVON PARK

State

FL

Zip Code

33825-9702

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 Y
05 / 05 / 2018

Transaction ID : SA17.1211516

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 OF 610

(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. ACHAY, JANET K, , ,

Mailing Address P.O. BOX 2531

City
KAILUA KONAState
HIZip Code
96745-2531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CREATIVE DAY PRESCHOOLOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

Transaction ID : SA17.1210315

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ACHAY, JANET K, , ,

Mailing Address P.O. BOX 2531

City
KAILUA KONAState
HIZip Code
96745-2531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CREATIVE DAY PRESCHOOLOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211644

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ACHAY, JANET K, , ,

Mailing Address P.O. BOX 2531

City
KAILUA KONAState
HIZip Code
96745-2531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CREATIVE DAY PRESCHOOLOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	8		

Transaction ID : SA17.1217064

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

65.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 610
(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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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

A. ACHAY, JANET K, , ,

Mailing Address P.O. BOX 2531

City
KAILUA KONAState
HIZip Code
96745-2531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CREATIVE DAY PRESCHOOLOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220306

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ADAIR, AARON, , ,

Mailing Address P.O. BOX - 510092

City
KEALIAState
HIZip Code
96751-0092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	6			2	0	1	8		

Transaction ID : SA17.1218852

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ADAIR, AARON, , ,

Mailing Address P.O. BOX - 510092

City
KEALIAState
HIZip Code
96751-0092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1222193

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 48 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ADAY, DONALD, , ,

Mailing Address 2325 DREAM ST

City
REDDING

State
CA

Zip Code
96001-5938

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIVATE RANCHER

Occupation (for Individual)
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212395

Amount of Each Receipt this Period

100.00

☐ 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212258

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. AHLBUM, JONATHAN, , ,

Mailing Address 2000 BANKS RD
209

City
MARGATE

State
FL

Zip Code
33063-7735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210501

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 49 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. AHLBUM, JONATHAN, , ,

Mailing Address 2000 BANKS RD
209

City
MARGATE

State
FL

Zip Code
33063-7735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218790

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. AIKIN, PATRICIA, , ,

Mailing Address 11545 N. PA BE SHAN TRAIL

City

CHARLEVOIX

State

MI

Zip Code

49720-2113

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
05 / 05 / 2018

Transaction ID : SA17.1213268

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. AKE, THOMAS, , ,

Mailing Address 27854 SANTA CLARITA ROAD

City

SAUGUS

State

CA

Zip Code

91350-1348

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213862

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

FOR LINE NUMBER: PAGE 50 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. ALBERT, CHARLES, , ,

Mailing Address 210 INDIAN SPRINGS DRIVE

City
FLORENCEState
ALZip Code
35634-2056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUNTSVILLE HOSPITALOccupation (for Individual)
PHYSICIAN

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
05		03		2018

Transaction ID : SA17.1210277

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. ALDERSON, DAN, , ,

Mailing Address 1127 BUFFALO WILSON RD

City
COLVILLEState
WAZip Code
99114-9715FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		03		2018

Transaction ID : SA17.1210278

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. ALDRIDGE, STEPHANIE, , ,

Mailing Address 21 DESERT SKY ROAD SE

City
ALBUQUERQUEState
NMZip Code
87123-3983FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALBERTSONSOccupation (for Individual)
CASHIER

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
05		05		2018

Transaction ID : SA17.1212686

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 51 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ALDRIDGE, STEPHANIE, , ,

Mailing Address 21 DESERT SKY ROAD SE

City
ALBUQUERQUE

State
NM

Zip Code
87123-3983

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALBERTSONS

Occupation (for Individual)
CASHIER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213273

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ALEXIEV, BORISLAV, , ,

Mailing Address 6453 N BOSWORTH AVE
APT 1

City
CHICAGO

State
IL

Zip Code
60626-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHWESTERN MEMORIAL HOSPITAL

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212632

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. ALEXIEV, BORISLAV, , ,

Mailing Address 6453 N BOSWORTH AVE
APT 1

City
CHICAGO

State
IL

Zip Code
60626-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHWESTERN MEMORIAL HOSPITAL

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215505

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 52 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ALLAN, JAMES, , ,

Mailing Address 1693 MC DONALD RD

City
ROCKWALL

State
TX

Zip Code
75032-8672

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212429

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ALLEN, DOYLE, , ,

Mailing Address 2121 NORTH SAINT JOSEPH ST

City
GONZALES

State
TX

Zip Code
78629-2167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLEN'S BODY TECH INC.

Occupation (for Individual)
ALLEN'S BODY TECH INC.

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
05 / 05 / 2018

Transaction ID : SA17.1213859

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. ALLEN, MARY, , ,

Mailing Address 1636 SPRING HOUSE TRAIL

City
VIRGINIA BEACH

State
VA

Zip Code
23455-7004

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210801

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 53 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ALLEN, MARY, , ,

Mailing Address 1636 SPRING HOUSE TRAIL

City
VIRGINIA BEACH

State
VA

Zip Code
23455-7004

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211078

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ALLISON, PAUL, , ,

Mailing Address 800 N. PENNSYLVANIA STREET

City
DENVER

State
CO

Zip Code
80203-3151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED FUTURE OPPORTUNITIES

Occupation (for Individual)
SELF EMPLOYED FUTURE OPPORTUNITIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211255

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ANCELIN, CAROLE, , ,

Mailing Address 813 ROYAL CREST COURT

City
MCKINNEY

State
TX

Zip Code
75070-4915

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221403

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 54 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ANCELIN, CAROLE, , ,

Mailing Address 813 ROYAL CREST COURT

City
MCKINNEY

State
TX

Zip Code
75070-4915

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222278

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ANDERSON, CAMERON, , ,

Mailing Address 15400 FOREST HAVEN LANE

City
FRISCO

State
TX

Zip Code
75035-6890

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAE CONSULTING

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215725

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ANDERSON, JUDI, , ,

Mailing Address 27 ADAM WAY

City
ATHERTON

State
CA

Zip Code
94027-3901

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
05 / 05 / 2018

Transaction ID : SA17.1212568

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

1065.00

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

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

FOR LINE NUMBER: PAGE 55 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ANDERSON, TERRY, , ,

Mailing Address 1003 BIRMINGHAM RIDGE RD

City
SALTILLO

State
MS

Zip Code
38866-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
AIRFIELD SOLUTIONS, LLC

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
05 / 19 / 2018

Transaction ID : SA17.1221404

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. ANDERSON, TERRY, , ,

Mailing Address 1003 BIRMINGHAM RIDGE RD

City
SALTILLO

State
MS

Zip Code
38866-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
AIRFIELD SOLUTIONS, LLC

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
05 / 19 / 2018

Transaction ID : SA17.1221405

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. ANDERSON, TERRY, , ,

Mailing Address 1003 BIRMINGHAM RIDGE RD

City
SALTILLO

State
MS

Zip Code
38866-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
AIRFIELD SOLUTIONS, LLC

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
05 / 20 / 2018

Transaction ID : SA17.1221928

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 56 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ANDERSON, TERRY, , ,

Mailing Address 1003 BIRMINGHAM RIDGE RD

City
SALTILLO

State
MS

Zip Code
38866-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
AIRFIELD SOLUTIONS, LLC

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
05 / 20 / 2018

Transaction ID : SA17.1221929

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. ANDREAS, SHARON, , ,

Mailing Address 26417 S DARTFORD DRIVE

City
CHANDLER

State
AZ

Zip Code
85248-7134

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
05 / 06 / 2018

Transaction ID : SA17.1213890

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. ANDREWS, WILLIAM, , ,

Mailing Address 1409 MORAN RD

City
FRANKLIN

State
TN

Zip Code
37069-6301

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

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211119

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

FOR LINE NUMBER: PAGE 57 OF 610

(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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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

A. ANDREWS, WILLIAM, , ,

Mailing Address 1409 MORAN RD

City
FRANKLINState
TNZip Code
37069-6301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	8		

Transaction ID : SA17.1220942

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. ANGLIN, WALTER, , ,

Mailing Address 270 PR 7131

City
QUITMANState
TXZip Code
75783FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	1			2	0	1	8		

Transaction ID : SA17.1216314

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ANGLIN, WALTER, , ,

Mailing Address 270 PR 7131

City
QUITMANState
TXZip Code
75783FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220436

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

60.00

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

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

FOR LINE NUMBER: PAGE 58 OF 610

(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. ASBURY, DAVID, , ,

Mailing Address 3438 PEACHTREE RD
SET 1100

City
ATLANTA

State
GA

Zip Code
30326-1555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHWESTERN BENEFIT CORPORATION

Occupation (for Individual)
BUSINESS OWNER

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
05 / 19 / 2018

Transaction ID : SA17.1221406

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. ASBURY, DAVID, , ,

Mailing Address 3438 PEACHTREE RD
SET 1100

City
ATLANTA

State
GA

Zip Code
30326-1555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHWESTERN BENEFIT CORPORATION

Occupation (for Individual)
BUSINESS OWNER

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
05 / 19 / 2018

Transaction ID : SA17.1221407

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. ASBURY, HERB, , ,

Mailing Address 4435 FOXENWOOD LANE

City
SANTA MARIA

State
CA

Zip Code
93455-4209

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211629

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 59 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ASBURY, HERB, , ,

Mailing Address 4435 FOXENWOOD LANE

City
SANTA MARIA

State
CA

Zip Code
93455-4209

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212014

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ASBURY, HERB, , ,

Mailing Address 4435 FOXENWOOD LANE

City
SANTA MARIA

State
CA

Zip Code
93455-4209

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215472

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ASBURY, HERB, , ,

Mailing Address 4435 FOXENWOOD LANE

City
SANTA MARIA

State
CA

Zip Code
93455-4209

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA17.1217716

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 OF 610

(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. ATKIN, JEFFERY, , ,

Mailing Address 390 DEL MAR DR.

 City
 SAINT GEORGE

 State
 UT

 Zip Code
 84790-7981

 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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210650

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. AUGUSTINE, KIM, , ,

Mailing Address 12 DUCKHOOK CIRCLE

 City
 CLOVER

 State
 SC

 Zip Code
 29710-9214

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 ELITE TEAM REALTY

 Occupation (for Individual)
 REAL ESTATE BROKER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212670

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. AUGUSTINE, KIM, , ,

Mailing Address 12 DUCKHOOK CIRCLE

 City
 CLOVER

 State
 SC

 Zip Code
 29710-9214

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 ELITE TEAM REALTY

 Occupation (for Individual)
 REAL ESTATE BROKER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212923

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 610

(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. AUTAND, RONALD, , ,

Mailing Address 14212 DOOLITTLE DR.

City
SAN LEANDROState
CAZip Code
94577-5542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMERCIAL DOOR & FRAME, INC.Occupation (for Individual)
COMMERCIAL DOOR & FRAME, INC.

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213323

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. BAIN, GAIL, , ,

Mailing Address 3939 ERIE AVE.
2100City
CINCINNATIState
OHZip Code
45208-1954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211381

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BAIN, GAIL, , ,

Mailing Address 3939 ERIE AVE.
2100City
CINCINNATIState
OHZip Code
45208-1954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213384

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 62 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BAIN, GAIL, , ,

Mailing Address 3939 ERIE AVE.
2100

City
CINCINNATI

State
OH

Zip Code
45208-1954

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1219935

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BAKER, BRADFORD, , ,

Mailing Address 270 RIVER BROOK RD

City
ROCHESTER

State
VT

Zip Code
05767-4406

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
05 / 05 / 2018

Transaction ID : SA17.1213263

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. BAKER, BUN, , ,

Mailing Address 825 HOLLOWDALE

City
EDMOND

State
OK

Zip Code
73003-3022

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213541

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 63 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BALDRIDGE, CHESTER, , ,

Mailing Address 4681 COUNTY RD. 25

City
MARENGO

State
OH

Zip Code
43334-9667

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212562

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BALLARD, CAROL, , ,

Mailing Address 108 BRIDLE PATH

City
PIKE ROAD

State
AL

Zip Code
36064-3418

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
05 / 01 / 2018

Transaction ID : SA17.1209508

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. BALLARD, WILLIAM, , ,

Mailing Address 845 12TH STREET

City
BILLINGS

State
MT

Zip Code
59106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BALLARD PETROLEUM HOLDINGS LLC

Occupation (for Individual)
OIL & GAS E & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214087

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 64 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BALLARD, WILLIAM, , ,

Mailing Address 845 12TH STREET

City
BILLINGS

State
MT

Zip Code
59106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BALLARD PETROLEUM HOLDINGS LLC

Occupation (for Individual)

OIL & GAS E & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

05 / 19 / 2018

Transaction ID : SA17.1220914

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BALLARD, WILLIAM, , ,

Mailing Address 845 12TH STREET

City
BILLINGS

State
MT

Zip Code
59106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BALLARD PETROLEUM HOLDINGS LLC

Occupation (for Individual)

OIL & GAS E & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

05 / 24 / 2018

Transaction ID : SA17.1223382

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BALOWSKI, MICHAEL, , ,

Mailing Address 52019 N FOREPAUGH PEAK RD

City
WICKENBURG

State
AZ

Zip Code
85390-2095

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213310

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 65 OF 610

(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. BANKS, JOAN, , ,

Mailing Address 50 PIERCE AVE

City
LAKEVILLEState
MAZip Code
02347-1801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	2			2	0	1	8		

Transaction ID : SA17.1222472

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. BARBETTI, DONNA, , ,

Mailing Address 1760 SANDERSON AVENUE

City
SCRANTONState
PAZip Code
18509-1853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICHAEL A. BARBETTI,LLC.CPAOccupation (for Individual)
OFFICE MANAGER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211856

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARNETT, JEFFREY, , ,

Mailing Address 3 CYPRESS POINT

City
WIMBERLEYState
TXZip Code
78676-9414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TUTOR PERINI CORPORATIONOccupation (for Individual)
VP - ENVIRONMENTAL SAFETY AND

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212598

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 66 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212927

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214293

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215633

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

50.00

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 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216508

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA17.1217621

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219155

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 68 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219852

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219853

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUT

State
CA

Zip Code
91789-2325

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 ▼

330.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221094

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 69 OF 610

(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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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

A. BARR, ARDITH, , ,

Mailing Address 215 MACALESTER DRIVE

City
WALNUTState
CAZip Code
91789-2325FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M	D D	Y Y Y Y
05	25	2018

Transaction ID : SA17.1223821

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BARRERA, JOSE, , ,

Mailing Address POB 331535

City
CORPUS CHRISTIState
TXZip Code
78463-1535FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2018

Transaction ID : SA17.1222891

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. BARRERA, JOSE, , ,

Mailing Address POB 331535

City
CORPUS CHRISTIState
TXZip Code
78463-1535FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	D D	Y Y Y Y
05	23	2018

Transaction ID : SA17.1222892

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 70 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BARRERA, JOSE, , ,

Mailing Address POB 331535

City
CORPUS CHRISTI

State
TX

Zip Code
78463-1535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / **26** / **2018**

Transaction ID : SA17.1223886

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. BARRICKMAN, JEFF, , ,

Mailing Address 944 JONESVILLE RD

City
SPOKANE

State
MO

Zip Code
65754-9195

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / **24** / **2018**

Transaction ID : SA17.1223639

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. BARRY, JOSEPH, , ,

Mailing Address P.O.BOX 380

City
SCHAEFFERTOWN

State
PA

Zip Code
17088-0380

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF LEBANON FARMS

Occupation (for Individual)
FARMING-HAULING-SELF FAMILY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213760

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 71 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BARSTOW, LEWIS, , ,

Mailing Address 10195 E. ROSE GLEN BLVD.

City
CLAREMORE

State
OK

Zip Code
74019-3827

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
05 / 05 / 2018

Transaction ID : SA17.1213170

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. BASSO, FRED, , ,

Mailing Address 34 SOUTH BROADWAY - 216

City
WHITE PLAINS

State
NY

Zip Code
10603-2815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FMB BENEFITS, INC.

Occupation (for Individual)
INSURANCE BROKER

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
05 / 05 / 2018

Transaction ID : SA17.1213681

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. BAVIS, EDWARD, , ,

Mailing Address 5445 SADDLEBROOK WAY

City
WESLEY CHAPEL

State
FL

Zip Code
33543-4337

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212967

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 72 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BAVIS, EDWARD, , ,

Mailing Address 5445 SADDLEBROOK WAY

City
WESLEY CHAPEL

State
FL

Zip Code
33543-4337

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213571

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. BAXTER, SERA, , ,

Mailing Address LOT 12 MACDONALD SPIT,

City
SELDOVIA

State
AK

Zip Code
99663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
COMMERCIAL FISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220401

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BEACHAM, EUGENE, , ,

Mailing Address 11581 SW 78TH AVE

City
OCALA

State
FL

Zip Code
34476-9419

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
05 / 01 / 2018

Transaction ID : SA17.1209396

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BEATTIE, CHRISTOPHER, , ,

Mailing Address 74 LEONARD ST

City
WADING RIVER

State
NY

Zip Code
11792-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEKMARK

Occupation (for Individual)
COMPUTER PROGRAMMER

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
05 / 05 / 2018

Transaction ID : SA17.1212348

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. BECK, CHARLES, , ,

Mailing Address 10335 N. 128TH STREET

City
SCOTTSDALE

State
AZ

Zip Code
85259-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CHEVRON DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211927

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BECKMAN, TONI, , ,

Mailing Address 19845 DEEP HARBOR DR.
UNIT 109

City
HUNTINGTON BEACH

State
CA

Zip Code
92648-3060

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 Y Y
05 / 11 / 2018

Transaction ID : SA17.1215639

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 74 OF 610

(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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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

A. BECKMAN, TONI, , ,

Mailing Address 19845 DEEP HARBOR DR.
UNIT 109

City
HUNTINGTON BEACH

State
CA

Zip Code
92648-3060

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
05 / 19 / 2018

Transaction ID : SA17.1221408

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. BECKMAN, TONI, , ,

Mailing Address 19845 DEEP HARBOR DR.
UNIT 109

City
HUNTINGTON BEACH

State
CA

Zip Code
92648-3060

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
05 / 19 / 2018

Transaction ID : SA17.1221409

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. BECKMAN, TONI, , ,

Mailing Address 19845 DEEP HARBOR DR.
UNIT 109

City
HUNTINGTON BEACH

State
CA

Zip Code
92648-3060

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
05 / 19 / 2018

Transaction ID : SA17.1221410

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 610

(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. BEELER, VICKI, , ,

Mailing Address 3338 PLANTATION POINT DR.

City
ATHENSState
TXZip Code
75752-6152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05	/	18	/	2018

Transaction ID : SA17.1220416

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. BELL, ANDREA, , ,

Mailing Address 14214 RIDGEWOOD LAKE COURT

City
HOUSTONState
TXZip Code
77062-2349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05	/	19	/	2018

Transaction ID : SA17.1221131

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BELLINGER, MICHAEL, , ,

Mailing Address 1170 N 900 E

City
LAYTONState
UTZip Code
84040-5114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05	/	30	/	2018

Transaction ID : SA17.1224361

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 76 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BELLOT, WILLIAM, , ,

Mailing Address 9625 S MAIN ST

City
CHATHAM

State
IL

Zip Code
62629-8669

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

05 / 05 / 2018

Transaction ID : SA17.1212070

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BELLOT, WILLIAM, , ,

Mailing Address 9625 S MAIN ST

City
CHATHAM

State
IL

Zip Code
62629-8669

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

05 / 05 / 2018

Transaction ID : SA17.1212252

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BENEDETTI, JOSEPH, , ,

Mailing Address 21 BLOOMFIELD ROAD

City
BURLINGAME

State
CA

Zip Code
94010-3012

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

05 / 05 / 2018

Transaction ID : SA17.1212653

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

160.00

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

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

FOR LINE NUMBER: PAGE 77 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BENNETT, JAMES, , ,

Mailing Address 18922 146TH ST. EAST

City
BONNEY LAKE

State
WA

Zip Code
98391-7553

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 ▼

340.00

Date of Receipt

05 / **27** / **2018**

Transaction ID : SA17.1223994

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BENNETT, JAMES, , ,

Mailing Address 18922 146TH ST. EAST

City
BONNEY LAKE

State
WA

Zip Code
98391-7553

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 ▼

340.00

Date of Receipt

05 / **30** / **2018**

Transaction ID : SA17.1224328

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BENNETT, JOHN, , ,

Mailing Address 29 MEADOWLARK LANE

City
HILTON HEAD ISLAND

State
SC

Zip Code
29926-1371

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

05 / **16** / **2018**

Transaction ID : SA17.1218897

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 78 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BERGEN, JANIS, , ,

Mailing Address 505 MATOAKA RD.

City
RICHMOND

State
VA

Zip Code
23226-2118

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
05 / 05 / 2018

Transaction ID : SA17.1213509

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. BERGSTEN, PETER, , ,

Mailing Address 14730 FAIR HAVENS ROAD

City
FORT MYERS

State
FL

Zip Code
33908-1624

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213580

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211141

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 79 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.121159

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.121193

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211329

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 80 OF 610

(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. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2018

Transaction ID : SA17.1211518

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 09 / 2018

Transaction ID : SA17.1214420

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 11 / 2018

Transaction ID : SA17.1216153

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

20.00

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

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

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

FOR LINE NUMBER: PAGE 81 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216381

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 13 / 2018

Transaction ID : SA17.1217102

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA17.1222424

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 82 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BERLINER, CHIZUKO, , ,

Mailing Address 14 LANDFALL CT

City
NEWPORT BEACH

State
CA

Zip Code
92663

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 ▼

515.00

Date of Receipt

05 / **28** / **2018**

Transaction ID : SA17.1224095

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERMAN, MARK, , ,

Mailing Address 603 OCEAN AVE
UNIT 2E

City
SANTA MONICA

State
CA

Zip Code
90402-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF / CELL SURGICAL NETWORK

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / **20** / **2018**

Transaction ID : SA17.1221852

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BERTSCH, JOHN, , ,

Mailing Address 644 CASCADE HILLS HOLLOW

City
GRAND RAPIDS

State
MI

Zip Code
49546-3661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1210807

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

205.00

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

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

FOR LINE NUMBER: PAGE 83 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BERTSCH, JOHN, , ,

Mailing Address 644 CASCADE HILLS HOLLOW

City
GRAND RAPIDS

State
MI

Zip Code
49546-3661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211129

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BETTS, HELLA, , ,

Mailing Address 2729 SW 6TH AVE.

City
PORTLAND

State
OR

Zip Code
97202-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE WESTERN REPS.,INC

Occupation (for Individual)
BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213465

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BEYER, SANDRA, , ,

Mailing Address P O BOX 1315

City
BROWNFIELD

State
TX

Zip Code
79316-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAHEY FARMS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213115

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 84 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. BIEN, MAI, , ,

Mailing Address 18722 FOX KESTREL TRL

City
CYPRESSState
TXZip Code
77429-6692FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	2			2	0	1	8		

Transaction ID : SA17.1210049

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BIEN, MAI, , ,

Mailing Address 18722 FOX KESTREL TRL

City
CYPRESSState
TXZip Code
77429-6692FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219418

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. BIGINI, MICHAEL, , ,

Mailing Address 12030 FOREST ESTATES DRIVE,

City
HOUSTONState
TXZip Code
77066-2730FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212291

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

FOR LINE NUMBER: PAGE 85 OF 610

(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. BIRDIE, KHURSHED, , ,Mailing Address 150 W. END AVE
APT 9FCity
NEW YORKState
NYZip Code
10023-5713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHSTAR TECHNOLOGIES INC.Occupation (for Individual)
TECHNOLOGY CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018**Transaction ID : SA17.1213157**

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BIRDIE, KHURSHED, , ,Mailing Address 150 W. END AVE
APT 9FCity
NEW YORKState
NYZip Code
10023-5713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHSTAR TECHNOLOGIES INC.Occupation (for Individual)
TECHNOLOGY CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018**Transaction ID : SA17.1220107**

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BIRDIE, KHURSHED, , ,Mailing Address 150 W. END AVE
APT 9FCity
NEW YORKState
NYZip Code
10023-5713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTHSTAR TECHNOLOGIES INC.Occupation (for Individual)
TECHNOLOGY CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018**Transaction ID : SA17.1222692**

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

75.00

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

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

FOR LINE NUMBER: PAGE 86 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BIZZOZERO, JOAN, , ,

Mailing Address 113 DEL MESA CAZRMEL

City
CARMEL

State
CA

Zip Code
93923-7950

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

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214106

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BIZZOZERO, JOAN, , ,

Mailing Address 113 DEL MESA CAZRMEL

City
CARMEL

State
CA

Zip Code
93923-7950

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

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215521

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BIZZOZERO, JOAN, , ,

Mailing Address 113 DEL MESA CAZRMEL

City
CARMEL

State
CA

Zip Code
93923-7950

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

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215522

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

35.00

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

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

FOR LINE NUMBER: PAGE 87 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BLACKMON, PHILLIP R, , ,

Mailing Address 115 ACORN LANE

City
DANVILLE

State
VA

Zip Code
24541-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RMA

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 22 / 2018

Transaction ID : SA17.1222455

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. BLESSING, BILL, , ,

Mailing Address 167 CR4202

City
CANTON

State
TX

Zip Code
75103

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

05 / 20 / 2018

Transaction ID : SA17.1221462

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. BLOEMHOF, BONNIE, , ,

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 ▼

275.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215765

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 88 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BLOEMHOF, BONNIE, , ,

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 ▼

275.00

Date of Receipt

05 / 12 / 2018

Transaction ID : SA17.1216902

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. BLYTHE, STEPHEN, , ,

Mailing Address 1403 N GREENWAY DR.

City
MIAMI

State
FL

Zip Code
33134-4774

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212465

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. BOGNER, RICHARD, , ,

Mailing Address 4 HUNTERS LANE

City
ROSLYN

State
NY

Zip Code
11576-1306

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

05 / 05 / 2018

Transaction ID : SA17.1213359

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 89 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BOGNER, RICHARD, , ,

Mailing Address 4 HUNTERS LANE

City
ROSLYN

State
NY

Zip Code
11576-1306

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

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216223

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BOGORICIN, JULIO, , ,

Mailing Address 10 E 40TH STREET
3203

City
NEW YORK

State
NY

Zip Code
10016-0200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JBREC CORP.

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1220918

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BOLIVAR, VIRGINIA, , ,

Mailing Address 3205 HERITAGE

City
ARLINGTON

State
TX

Zip Code
76016-2071

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
05 / 27 / 2018

Transaction ID : SA17.1224081

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 90 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BONOMO, JOHN, , ,

Mailing Address 17025 SHERIDANS TRL

City
ORLAND PARK

State
IL

Zip Code
60467-5405

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 ▼

310.00

Date of Receipt

05 / **01** / **2018**

Transaction ID : SA17.1209385

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BONOMO, JOHN, , ,

Mailing Address 17025 SHERIDANS TRL

City
ORLAND PARK

State
IL

Zip Code
60467-5405

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 ▼

310.00

Date of Receipt

05 / **04** / **2018**

Transaction ID : SA17.1210496

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BONOMO, JOHN, , ,

Mailing Address 17025 SHERIDANS TRL

City
ORLAND PARK

State
IL

Zip Code
60467-5405

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 ▼

310.00

Date of Receipt

05 / **12** / **2018**

Transaction ID : SA17.1217065

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 91 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BONOMO, JOHN, , ,

Mailing Address 17025 SHERIDANS TRL

City
ORLAND PARK

State
IL

Zip Code
60467-5405

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222414

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. BONOMO, JOHN, , ,

Mailing Address 17025 SHERIDANS TRL

City
ORLAND PARK

State
IL

Zip Code
60467-5405

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA17.1224386

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. BOONE, DOUGLAS, , ,

Mailing Address 2115 S 162 ND STREET

City
NEW BERLIN

State
WI

Zip Code
53151-2201

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
05 / 29 / 2018

Transaction ID : SA17.1224243

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 92 OF 610

(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

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

A. BOUCKLEY, JOHN, , ,

Mailing Address 914 EATERY LANE

City
BRIELLE

State
NJ

Zip Code
08730

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216523

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. BOULDIN, VICKIE, , ,

Mailing Address 707 CREEK FOREST CIRCLE

City
SPRING

State
TX

Zip Code
77380-2283

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214030

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BOULDIN, VICKIE, , ,

Mailing Address 707 CREEK FOREST CIRCLE

City
SPRING

State
TX

Zip Code
77380-2283

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216980

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 93 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRADBURY, NOLAN, , ,

Mailing Address BOX 218

City
BREWERTON

State
NY

Zip Code
13029-0218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
OWNER

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
05 / 13 / 2018

Transaction ID : SA17.1217295

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. BRADEN, CLARE, , ,

Mailing Address 2618 PRIVATE ROAD 2410

City
QUINLAN

State
TX

Zip Code
75474-7636

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
05 / 17 / 2018

Transaction ID : SA17.1219422

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. BRADLEY, ELAINE, , ,

Mailing Address 4050 OLD RANCH RD

City
COLORADO SPRINGS

State
CO

Zip Code
80908-3751

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 Y
05 / 15 / 2018

Transaction ID : SA17.1217835

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

FOR LINE NUMBER: PAGE 94 OF 610

(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. BRADY, FRANKLIN, , ,

Mailing Address 43182 W OAKSIDE PL

City
DAVISState
CAZip Code
95618-4960FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	5			2	0	1	8		

Transaction ID : SA17.1223728

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BRAMEL, CINDY, , ,

Mailing Address 7543 IN WOOD HOUSTON TX

City
HOUSTONState
TXZip Code
77063FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRAMEL TRUCKING CO., INC.Occupation (for Individual)
TRUCK BROKER

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
0	5			1	2			2	0	1	8		

Transaction ID : SA17.1216507

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. BRICKER, DONALD, , ,

Mailing Address 1532 CR 222

City
DURANGOState
COZip Code
81303-8101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	4			2	0	1	8		

Transaction ID : SA17.1210332

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

200.00

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

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

FOR LINE NUMBER: PAGE 95 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRIGGS, BOB, , ,

Mailing Address 9597 BEECHWOOD DR.

City
ALTA LOMA

State
CA

Zip Code
91737-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DCI

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212986

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210485

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1214874

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 96 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219857

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219858

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221172

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

15.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221173

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

05 / **22** / **2018**

Transaction ID : SA17.1222554

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

05 / **23** / **2018**

Transaction ID : SA17.1223348

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

25.00

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

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

FOR LINE NUMBER: PAGE 98 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA17.1223349

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BRISTOL, ELIZABETH, , ,

Mailing Address 1086 MOUNT HOPE ST.

City
NORTH ATTLEBORO

State
MA

Zip Code
02760-1910

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 ▼

295.00

Date of Receipt

05 / 30 / 2018

Transaction ID : SA17.1224365

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BRITT, HENRY, , ,

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 ▼

3000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210620

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 99 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BRITT, HENRY, , ,

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 ▼

3000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210621

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BROCK, JACK, , ,

Mailing Address P.O. BOX 2128

City
EASLEY

State
SC

Zip Code
29641-2128

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

05 / 05 / 2018

Transaction ID : SA17.1213607

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. BROWN, C, , ,

Mailing Address 8675 WESTCOTT

City
GERMANTOWN

State
TN

Zip Code
38138-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UCL FINANCIAL.COM

Occupation (for Individual)
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212626

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 100 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BROWN, FRANKLIN, , ,

Mailing Address 2950 ANGELETTE DR.

City
AUSTELL

State
GA

Zip Code
30106-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DIXIE PRECAST INC

Occupation (for Individual)
SELF MFRG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 05 / 2018

Transaction ID : SA17.1211875

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. BROWN, KEVIN, , ,

Mailing Address 5717 W 146TH ST,

City
SHAWNEE MISSION

State
KS

Zip Code
66223-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIV OF KS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

MM / DD / YYYY
05 / 05 / 2018

Transaction ID : SA17.1212057

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. BROWN, KEVIN, , ,

Mailing Address 5717 W 146TH ST,

City
SHAWNEE MISSION

State
KS

Zip Code
66223-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIV OF KS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.00

Date of Receipt

MM / DD / YYYY
05 / 24 / 2018

Transaction ID : SA17.1223385

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

105.00

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

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

FOR LINE NUMBER: PAGE 101 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BROYLES, GREG, , ,

Mailing Address 941 TECUMSEH DR.

City
SAINT MARYS

State
OH

Zip Code
45885-1672

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AUGLAIZE EQUIPMENT RENTAL INC.

Occupation (for Individual)
SELF EMPLOYED

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
05 / 05 / 2018

Transaction ID : SA17.1213248

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. BRUCK, TROY, , ,

Mailing Address 850 E SHELBY

City
SHELBY

State
MI

Zip Code
49455-9743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRUCK TRUCKING LLC

Occupation (for Individual)
OWNER

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
05 / 05 / 2018

Transaction ID : SA17.1212518

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. BRUDER, THOMAS, , ,

Mailing Address 600 REED ROAD
SUITE 301

City
BROOMALL

State
PA

Zip Code
19008-3505

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA17.1210305

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 102 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BUEHRLE, WILLIS, , ,

Mailing Address 4324 CHATEAU RIDGE ROAD

City
CASTLE ROCK

State
CO

Zip Code
80108-8424

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
05 / 05 / 2018

Transaction ID : SA17.1213186

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. BULACH, ROSALIE, , ,

Mailing Address 9236 OAK TRAIL CIRCLE

City
SANTA ROSA

State
CA

Zip Code
95409-6163

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1214950

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BULACH, ROSALIE, , ,

Mailing Address 9236 OAK TRAIL CIRCLE

City
SANTA ROSA

State
CA

Zip Code
95409-6163

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215357

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 103 OF 610

(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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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

A. BULACH, ROSALIE, , ,

Mailing Address 9236 OAK TRAIL CIRCLE

City
SANTA ROSAState
CAZip Code
95409-6163FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2018

Transaction ID : SA17.1218231

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BULACH, ROSALIE, , ,

Mailing Address 9236 OAK TRAIL CIRCLE

City
SANTA ROSAState
CAZip Code
95409-6163FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2018

Transaction ID : SA17.1218538

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BULLARD, DAVID, , ,

Mailing Address 201 N PLAZA BLVD

City
CHILLICOTHEState
OHZip Code
45601-1761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OMSCOccupation (for Individual)
DENTIST

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
05		05		2018

Transaction ID : SA17.1211926

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 104 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BULLARD, DAVID, , ,

Mailing Address 201 N PLAZA BLVD

City
CHILLICOTHE

State
OH

Zip Code
45601-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OMSC

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212372

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. BULMAN, BARTON, , ,

Mailing Address 11500 GOLDENROD RD.

City
CALEDONIA

State
MN

Zip Code
55921-2801

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 Y Y
05 / 05 / 2018

Transaction ID : SA17.1211087

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BURDICK, NORMA, , ,

Mailing Address 921 N HOMSY

City
CLOVIS

State
CA

Zip Code
93611-7146

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
05 / 05 / 2018

Transaction ID : SA17.1213860

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 105 OF 610

(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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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

A. BURGESS JR., JOHN J., ,

Mailing Address 21805 TEGLEY

City
MISSION VIEJOState
CAZip Code
92692-3051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE BURGESS ENGINEERING GROUPOccupation (for Individual)
CONSULTING ENGINEER

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
05	/	19	/	2018

Transaction ID : SA17.1221122

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BURGIS, MALCOLM, , ,

Mailing Address 3 22ND AVENUE

City
ISLE OF PALMSState
SCZip Code
29451-2303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WINDJAMMER INCOccupation (for Individual)
GM

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
05	/	05	/	2018

Transaction ID : SA17.1213171

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BURNETT, SUSAN, , ,

Mailing Address 85 ELLENWOOD AVE.

City
LOS GATOSState
CAZip Code
95030-5220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2018

Transaction ID : SA17.1213615

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

235.00

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

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

FOR LINE NUMBER: PAGE 106 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BURNETT, SUSAN, , ,

Mailing Address 85 ELLENWOOD AVE.

City
LOS GATOS

State
CA

Zip Code
95030-5220

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 ▼

325.00

Date of Receipt

05 / **10** / **2018**

Transaction ID : SA17.1214653

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BURT, JOHN, , ,

Mailing Address 9208 BRILLIANT ORE DR.

City
LAS VEGAS

State
NV

Zip Code
89143-2305

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

05 / **05** / **2018**

Transaction ID : SA17.1210691

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BURTON, JAMES, , ,

Mailing Address 2012 ARMSTRONG MILL RD

City
FRANKLIN

State
GA

Zip Code
30217-3751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF WEST GA

Occupation (for Individual)
PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213654

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 107 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BURTON, JAMES, , ,

Mailing Address 2012 ARMSTRONG MILL RD

City
FRANKLIN

State
GA

Zip Code
30217-3751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF WEST GA

Occupation (for Individual)
PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213863

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BURY, BRUCE, , MR.,

Mailing Address 6006 HILLBROOK DR.

City
COLLEYVILLE

State
TX

Zip Code
76034-5321

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

05 / 14 / 2018

Transaction ID : SA17.1217791

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BUSH, JEAN MORGAN, , ,

Mailing Address 2206 HERITAGE HILL DRIVE

City
JACKSON

State
MS

Zip Code
39211-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WORTHNEWYORK

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212131

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

160.00

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

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

FOR LINE NUMBER: PAGE 108 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BUSH, JEAN MORGAN, , ,

Mailing Address 2206 HERITAGE HILL DRIVE

City
JACKSON

State
MS

Zip Code
39211-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WORTHNEWYORK

Occupation (for Individual)
SALES

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
05 / 18 / 2018

Transaction ID : SA17.1220686

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BUSH, JEAN MORGAN, , ,

Mailing Address 2206 HERITAGE HILL DRIVE

City
JACKSON

State
MS

Zip Code
39211-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WORTHNEWYORK

Occupation (for Individual)
SALES

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
05 / 18 / 2018

Transaction ID : SA17.1220687

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BUSH, JEAN MORGAN, , ,

Mailing Address 2206 HERITAGE HILL DRIVE

City
JACKSON

State
MS

Zip Code
39211-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WORTHNEWYORK

Occupation (for Individual)
SALES

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
05 / 19 / 2018

Transaction ID : SA17.1221322

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 109 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BUSH, JEAN MORGAN, , ,

Mailing Address 2206 HERITAGE HILL DRIVE

City
JACKSON

State
MS

Zip Code
39211-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WORTHNEWYORK

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221323

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BUTLER, KENNETH, , ,

Mailing Address P.O. BOX 298218

City
WASILLA

State
AK

Zip Code
99629-8218

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 ▼

375.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1220890

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. BUTLER, KENNETH, , ,

Mailing Address P.O. BOX 298218

City
WASILLA

State
AK

Zip Code
99629-8218

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 ▼

375.00

Date of Receipt

05 / **27** / **2018**

Transaction ID : SA17.1224056

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 110 OF 610

(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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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

A. BYRD, JERRY, , ,

Mailing Address 2110 T STREET SE

City
WASHINGTONState
DCZip Code
20020-4674FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

Transaction ID : SA17.1210163

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BYRD, JERRY, , ,

Mailing Address 2110 T STREET SE

City
WASHINGTONState
DCZip Code
20020-4674FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219835

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. BYRNE, BRIAN, , ,

Mailing Address 1048 CYPRESS CREEK ROAD

City
OAKDALEState
LAZip Code
71463-6029FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATURAL ADVANTAGEOccupation (for Individual)
NATURAL ADVANTAGE

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
0	5			0	9			2	0	1	8		

Transaction ID : SA17.1214604

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 111 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. BYRNE, BRIAN, , ,

Mailing Address 1048 CYPRESS CREEK ROAD

City
OAKDALE

State
LA

Zip Code
71463-6029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATURAL ADVANTAGE

Occupation (for Individual)
NATURAL ADVANTAGE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216012

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. C, ROBERT, , ,

Mailing Address 772 CARY DRIVE

City

SAN LEANDRO

State

CA

Zip Code

94577-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209972

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CADE, CHARLES, , ,

Mailing Address 123 WHITEHALL AVE

City

RINCON

State

GA

Zip Code

31326-5023

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 ▼

205.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212505

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

FOR LINE NUMBER: PAGE 112 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. CADE, CHARLES, , ,

Mailing Address 123 WHITEHALL AVE

City
RINCONState
GAZip Code
31326-5023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

Transaction ID : SA17.1224345

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CALDWELL, PATRICK, , ,

Mailing Address 1268 RIDGE RD

City
ROXBOROState
NCZip Code
27573-4347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CBS QUALITY CARSOccupation (for Individual)
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

Transaction ID : SA17.1224276

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CALI, JOANNE, , ,Mailing Address 5419 HOLLYWOOD BLVD
C814City
LOS ANGELESState
CAZip Code
90027-3480FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	8		

Transaction ID : SA17.1218298

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

295.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 610
(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. CALI, JOANNE, , ,Mailing Address 5419 HOLLYWOOD BLVD
C814City
LOS ANGELESState
CAZip Code
90027-3480FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018**Transaction ID : SA17.1220939**

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CALLEN, MICHAEL, , ,

Mailing Address 3690 OAK WOOD DRIVE

City
PARK CITYState
UTZip Code
84060-7808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05 / 05 / 2018**Transaction ID : SA17.1212068**

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CAMBLIN, CECELIA, , ,

Mailing Address 605 FOREST DRIVE

City
GREENVILLEState
ALZip Code
36037-3515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN FAMILY CAREOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018**Transaction ID : SA17.1210159**

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

135.00

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

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

FOR LINE NUMBER: PAGE 114 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. CAMBLIN, CECELIA, , ,

Mailing Address 605 FOREST DRIVE

City
GREENVILLEState
ALZip Code
36037-3515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN FAMILY CAREOccupation (for Individual)
PHYSICIAN

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213405

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CAMBLIN, CECELIA, , ,

Mailing Address 605 FOREST DRIVE

City
GREENVILLEState
ALZip Code
36037-3515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN FAMILY CAREOccupation (for Individual)
PHYSICIAN

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
0	5			2	4			2	0	1	8		

Transaction ID : SA17.1223408

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CAMPBELL, ALICE, , ,

Mailing Address 5290 PINNACLE CT

City
ANN ARBORState
MIZip Code
48108-8658FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211189

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

80.00

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

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

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

FOR LINE NUMBER: PAGE 115 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CAMPBELL, CHRISTOPHER, , ,

Mailing Address 8970 WILDLIFE LOOP

City
SARASOTA

State
FL

Zip Code
34238-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MUSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213432

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CAMPBELL, DEBORAH, , ,

Mailing Address 6 SUMMER ST

City
IPSWICH

State
MA

Zip Code
01938-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THERMOFISHER SCIENTIFIC

Occupation (for Individual)
SALES

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
05 / 05 / 2018

Transaction ID : SA17.1212435

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. CANNOVA, CARL, , ,

Mailing Address 7323 WESTMINSTER CT

City
BRADENTON

State
FL

Zip Code
34201-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STOP RUBBERNECKING PRIVACY BARRIERS

Occupation (for Individual)
MANUFACTURER

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
05 / 05 / 2018

Transaction ID : SA17.1213696

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 116 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CANON, JO, , ,

Mailing Address 102 TIQUEWOOD CIRCLE

City
ABILENE

State
TX

Zip Code
79605-4937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214286

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CANON, JO, , ,

Mailing Address 102 TIQUEWOOD CIRCLE

City
ABILENE

State
TX

Zip Code
79605-4937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215796

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CANTILLO, JOAQUIN, , ,

Mailing Address 703 WORTHINGTON MILL ROAD

City
RICHBORO

State
PA

Zip Code
18954-1971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHERIDAN HEALTHCARE

Occupation (for Individual)
PHYSICIAN

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
05 / 05 / 2018

Transaction ID : SA17.1212079

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 117 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CANTOR, IRIS, , ,

Mailing Address 220 BANYAN RD

City
PALM BEACH

State
FL

Zip Code
33480-4804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVESTOR

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
05 / 05 / 2018

Transaction ID : SA17.1212960

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. CANTOR, IRIS, , ,

Mailing Address 220 BANYAN RD

City
PALM BEACH

State
FL

Zip Code
33480-4804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVESTOR

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
05 / 10 / 2018

Transaction ID : SA17.1215051

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. CARDONA, MARIE, , ,

Mailing Address 726 ROCKLYN DRIVE

City
SAN ANTONIO

State
TX

Zip Code
78239-2148

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213484

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 118 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CARLSON, DONALD, , ,

Mailing Address 6812 WILD TURKEY DRIVE

City
SPOTSYLVANIA

State
VA

Zip Code
22553-7728

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL SERVICE ADMINISTRATION

Occupation (for Individual)
MANAGER, SECURITY SOLUTIONS B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213269

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. CARLSON, KATHY, , ,

Mailing Address 19320 CITRONIA ST

City
NORTHRIDGE

State
CA

Zip Code
91324-2111

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

05 / 05 / 2018

Transaction ID : SA17.1211713

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CARLSON, KATHY, , ,

Mailing Address 19320 CITRONIA ST

City
NORTHRIDGE

State
CA

Zip Code
91324-2111

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

05 / 05 / 2018

Transaction ID : SA17.1213114

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

110.00

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

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

FOR LINE NUMBER: PAGE 119 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CARLTON, SHEILA, , ,

Mailing Address 7412 ASHLAND LANE

City
BIRMINGHAM

State
AL

Zip Code
35242-2568

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

05 / **15** / **2018**

Transaction ID : SA17.1217844

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CARRASCO, BARBARA, , ,

Mailing Address 981 VEREDA DEL VALLE

City
EL PASO

State
TX

Zip Code
79932-2910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRANS-LOGISTICS

Occupation (for Individual)
FREIGHT BROKER--SELF EMPLOYEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / **10** / **2018**

Transaction ID : SA17.1215072

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. CARRICO, BRIAN, , ,

Mailing Address 221 AVENUE D

City
REDONDO BEACH

State
CA

Zip Code
90277-4911

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DR. OF CHIROPRACTIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213739

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 120 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CARROLL, KIM, , ,

Mailing Address 3864 N. BREHLER AVE.

City
SANGER

State
CA

Zip Code
93657-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUIZ FOOD PRODUCTS, INC.

Occupation (for Individual)
SENIOR VICE PRESIDENT OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212365

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. CARTER, KENNETH S, , ,

Mailing Address 4710 19TH ST

City
LUBBOCK

State
TX

Zip Code
79407-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OTTO'S GRANARY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210658

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. CARTER, LOWELL, , ,

Mailing Address 2 SWALLOW FIELD.

City
TERRACE PARK

State
OH

Zip Code
45174-1076

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

05 / 18 / 2018

Transaction ID : SA17.1220775

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 121 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CARTER, RAY, , ,

Mailing Address 5009 GADWALL CIR

City
STOCKTON

State
CA

Zip Code
95207-8311

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
05 / 05 / 2018

Transaction ID : SA17.1212560

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. CASHION, JOHN R, , ,

Mailing Address 11 MCMICHAEL DRIVE

City
PINEHURST

State
NC

Zip Code
28374-6702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EXXONMOBIL CORPORATION

Occupation (for Individual)
ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1217832

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CASSEL, RICHARD, , ,

Mailing Address 8909 EAGLEBROOK CT

City
RALEIGH

State
NC

Zip Code
27617-7539

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212259

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 122 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. CAWLEY, PATRICK, , ,

Mailing Address 6719 MYRTLE AVE

City
RIDGEWOODState
NYZip Code
11385-7056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213717

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CHALMERS, FONDA, , ,

Mailing Address 5100 ASHDOWN PLACE

City
MIDLANDState
TXZip Code
79705-2801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212292

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. CHAN, SALLY, , ,

Mailing Address 1430 WOODMAN AVENUE

City
SILVER SPRINGState
MDZip Code
20902-3905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211065

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 123 OF 610

(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. CHAN, SALLY, , ,

Mailing Address 1430 WOODMAN AVENUE

City
SILVER SPRINGState
MDZip Code
20902-3905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	2		2	0	1	8		

Transaction ID : SA17.1222713

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. CHANDLER, RICHARD, , ,

Mailing Address 5305 FAIRFIELD OVAL

City
SOLONState
OHZip Code
44139-1272FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CG THERMAL LLCOccupation (for Individual)
MGR

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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1212621

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CHANG, CYNTHIA C, , ,

Mailing Address 730 UPLAND RD

City
REDWOOD CITYState
CAZip Code
94062-3000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	4		2	0	1	8		

Transaction ID : SA17.1210418

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 124 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHANG, CYNTHIA C, , ,

Mailing Address 730 UPLAND RD

City
REDWOOD CITY

State
CA

Zip Code
94062-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA17.1215139

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CHANG, CYNTHIA C, , ,

Mailing Address 730 UPLAND RD

City
REDWOOD CITY

State
CA

Zip Code
94062-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220793

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CHANG, CYNTHIA C, , ,

Mailing Address 730 UPLAND RD

City
REDWOOD CITY

State
CA

Zip Code
94062-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA17.1221965

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 125 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHANG, CYNTHIA C., ,

Mailing Address 730 UPLAND RD

City
REDWOOD CITY

State
CA

Zip Code
94062-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA17.1224089

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CHANNON, ROBERT, , ,

Mailing Address 3850 GALLERIA WOODS DRIVE
103

City
HOOVER

State
AL

Zip Code
35244-1098

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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210348

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. CHANNON, ROBERT, , ,

Mailing Address 3850 GALLERIA WOODS DRIVE
103

City
HOOVER

State
AL

Zip Code
35244-1098

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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211427

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 126 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHAPEL, JUDY, , ,

Mailing Address 3268 GOVERNOR DR.
STE 388

City
SAN DIEGO

State
CA

Zip Code
92122-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SIS

Occupation (for Individual)
CONSULTANT

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
05 / 05 / 2018

Transaction ID : SA17.1212561

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. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTS

State
NM

Zip Code
87020-4215

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 ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219784

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTS

State
NM

Zip Code
87020-4215

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 ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1223316

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 127 OF 610

(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. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTSState
NMZip Code
87020-4215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	8		

Transaction ID : SA17.1223441

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTSState
NMZip Code
87020-4215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

Transaction ID : SA17.1224298

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. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTSState
NMZip Code
87020-4215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

Transaction ID : SA17.1224299

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 128 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHAVEZ, KATHLEEN, , ,

Mailing Address 144 COTTONWOOD DR.

City
GRANTS

State
NM

Zip Code
87020-4215

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 ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

Transaction ID : SA17.1224858

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. CHEATHAM, DONALD, , ,

Mailing Address 7500 SAN FELIPE ROAD
600

City
HOUSTON

State
TX

Zip Code
77063-1707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LAWYER

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
05 / 28 / 2018

Transaction ID : SA17.1224155

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CHENEY, LIANA, , ,

Mailing Address 112 CHARLES STREET

City
BOSTON

State
MA

Zip Code
02114-3201

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 ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212407

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 129 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHENEY, LIANA, , ,

Mailing Address 112 CHARLES STREET

City
BOSTON

State
MA

Zip Code
02114-3201

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 ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA17.1224334

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CHRISTY, DAVE, , ,

Mailing Address P.O. BOX 121

City
WOODBIDGE

State
CA

Zip Code
95258-0121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SALES

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
05 / 07 / 2018

Transaction ID : SA17.1214109

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. CHRISTIANSON, JOHN, , ,

Mailing Address 435 CASTILLO RD

City
SAN LUIS OBISPO

State
CA

Zip Code
93405-8009

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213626

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 130 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CHRISTIANSON, RICHARD, , ,

Mailing Address 122 HENDERSON WAY

City
FOLSOM

State
CA

Zip Code
95630-2916

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

05 / 05 / 2018

Transaction ID : SA17.1212599

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. CHURCHWELL, CHRIS D, , ,

Mailing Address 421 S SERGEANT

City
JOPLIN

State
MO

Zip Code
64801-2637

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212466

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. CIRKS, RAYMOND, , ,

Mailing Address 14071 YUCCA ST.

City
JAMUL

State
CA

Zip Code
91935-2021

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

05 / 05 / 2018

Transaction ID : SA17.1211731

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

FOR LINE NUMBER: PAGE 131 OF 610

(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. CIRKS, RAYMOND, , ,

Mailing Address 14071 YUCCA ST.

City
JAMULState
CAZip Code
91935-2021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

Transaction ID : SA17.1214441

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CLARK, JUDITH, , ,

Mailing Address 517E MAIN ST

City
LAKE CITYState
SCZip Code
29560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
NURSING HOMES

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
0	5			1	1			2	0	1	8		

Transaction ID : SA17.1216444

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. CLARK, LINDA, , ,

Mailing Address 488 SOUTH MAIN STREET

City
CENTERVILLEState
MAZip Code
02632-3403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210930

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

250.00

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

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

FOR LINE NUMBER: PAGE 132 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CLARK, THOMAS, , ,

Mailing Address 351 CLUB VIEW DR.

City
GREAT FALLS

State
VA

Zip Code
22066-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SERVICE BANKCARD

Occupation (for Individual)
EXECUTIVE

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
05 / 05 / 2018

Transaction ID : SA17.1213785

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. CLAUSEN, GEORGE, , ,

Mailing Address 24207D LOMITAS DR.

City
WOODLAKE

State
CA

Zip Code
93286-9506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ORANGE GROWER

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
05 / 05 / 2018

Transaction ID : SA17.1212423

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. CLAUS, PAUL, , ,

Mailing Address 220 BENTO CT

City
LINCOLN

State
NE

Zip Code
68521-2798

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LINCOLN PUBLIC SCHOOLS

Occupation (for Individual)
LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211602

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 133 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CLAUS, PAUL, , ,

Mailing Address 220 BENTO CT

City
LINCOLN

State
NE

Zip Code
68521-2798

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LINCOLN PUBLIC SCHOOLS

Occupation (for Individual)
LOCKSMITH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216219

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. CLAYTON, RONALD, , ,

Mailing Address P.O. BOX 1448

City
HAMILTON

State
AL

Zip Code
35570-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHURCH OF CHRIST INDIA MISSIONS

Occupation (for Individual)
MISSIONARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212239

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CLEARWATER, JOHN, , ,

Mailing Address 52 GOVERNORS LANE

City
PRINCETON

State
NJ

Zip Code
08540-3670

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
05 / 05 / 2018

Transaction ID : SA17.1212293

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 134 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CLEMENTS, RICHARD, , ,

Mailing Address 306 MIDLAND AVE

City
MORGANFIELD

State
KY

Zip Code
42437-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213537

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CLEMENTS, STEPHEN, , ,

Mailing Address 23530 HAAS AVE

City
TORRANCE

State
CA

Zip Code
90501-6057

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
05 / 16 / 2018

Transaction ID : SA17.1218399

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COGAN, JEAN, , ,

Mailing Address 20101 SHELBURNE RD., #1

City
CLEVELAND

State
OH

Zip Code
44118-5010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211896

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

185.00

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

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

FOR LINE NUMBER: PAGE 135 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COHEN, VILMA, , ,

Mailing Address 8 POSSUM TRAIL

City
SADDLE RIVER

State
NJ

Zip Code
07458-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AW AUTO & TRUCK WHOLESALERS INC

Occupation (for Individual)

AW AUTO & TRUCK WHOLESALERS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213870

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COKER, JAMES, , ,

Mailing Address 8704 WEDNESDAY 64TH PL
202

City
MERRIAM

State
KS

Zip Code
66202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SCRIPTPRO

Occupation (for Individual)

MECHANICAL DRAFTER

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
05 / 05 / 2018

Transaction ID : SA17.1213467

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. COLE, FRANCIS, , ,

Mailing Address 6195 BOSKEY DRIVE

City
MILLINGTON

State
TN

Zip Code
38053-6901

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 ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221474

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 136 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COLE, FRANCIS, , ,

Mailing Address 6195 BOSKEY DRIVE

City
MILLINGTON

State
TN

Zip Code
38053-6901

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 ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018

Transaction ID : SA17.1222753

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COLE, THOMAS, , ,

Mailing Address 8307 ELM GROVE COURT

City
VIENNA

State
VA

Zip Code
22182-6025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RMSC2 LAW

Occupation (for Individual)
PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214111

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COLON, BETTY, , ,

Mailing Address 2142 FAYTON COURT

City
CAMARILLO

State
CA

Zip Code
93010-1903

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
05 / 05 / 2018

Transaction ID : SA17.1211314

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 137 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CONNELL, MARY, , ,

Mailing Address 2931 WILLADSEN DRIVE

City
CLINTON

State
IA

Zip Code
52732-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AIR CONTROL, INC.

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210463

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CONWAY, KATE, , ,

Mailing Address 2070 ST. ANDREWS CIRCLE

City
CARMEL

State
IN

Zip Code
46032-9547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA17.1217813

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COOK, DONNA, , ,

Mailing Address 4949 COUNTY ROAD 237

City
DURANGO

State
CO

Zip Code
81301-8001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215288

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 138 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COOK, DONNA, , ,

Mailing Address 4949 COUNTY ROAD 237

City
DURANGO

State
CO

Zip Code
81301-8001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216557

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COOK, GEORGE R, , ,

Mailing Address 19 ANGELA WAY

City
NORTH SALT LAKE

State
UT

Zip Code
84054-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHOOTING SPORTS SOFTWARE

Occupation (for Individual)
SELF EMPLOYED

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
05 / 05 / 2018

Transaction ID : SA17.1212939

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. COOK, JUDY R., , ,

Mailing Address 6901 ANDERS BOTTOM RD.

City
LA GRANGE

State
TX

Zip Code
78945-5828

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 Y Y
05 / 22 / 2018

Transaction ID : SA17.1222714

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 139 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COOK, JUDY R., ,

Mailing Address 6901 ANDERS BOTTOM RD.

City
LA GRANGE

State
TX

Zip Code
78945-5828

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 Y Y
05 / 31 / 2018

Transaction ID : SA17.1224846

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COOMBS, ELLERY, ,

Mailing Address 1010 15TH ST. SW

City
JAMESTOWN

State
ND

Zip Code
58401-5320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HFI

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214519

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COOMBS, ELLERY, ,

Mailing Address 1010 15TH ST. SW

City
JAMESTOWN

State
ND

Zip Code
58401-5320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HFI

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1219977

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 140 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COOPER, BRUCE, , ,

Mailing Address 143 BARKSDALE LANE

City
MOORESVILLE

State
NC

Zip Code
28117-6613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211867

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COOPER, CHERYL, , ,

Mailing Address 10628 SE 44TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73150-2826

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210690

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COOPER, CHERYL, , ,

Mailing Address 10628 SE 44TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73150-2826

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212770

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 141 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COOPER, CHERYL, , ,

Mailing Address 10628 SE 44TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73150-2826

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214039

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COOPER, GARY, , ,

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 FABRICATOR'S INC.

Occupation (for Individual)
PRESIDENT

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
05 / 05 / 2018

Transaction ID : SA17.1211928

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COPE, RUSSELL J, , ,

Mailing Address 406 TAYLOR ROAD POB 636

City
CROSSVILLE

State
TN

Zip Code
38557-0636

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
05 / 05 / 2018

Transaction ID : SA17.1212294

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 142 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CORKERN, ROBERT, , ,

Mailing Address 1030 PINNIX RD

City
MATHISTON

State
MS

Zip Code
39752-6828

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DELTA REGIONAL MEDICAL CENTER, GREENVI

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 13 / 2018

Transaction ID : SA17.1217154

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CORLEY, HAROLD, , ,

Mailing Address 3705 SOUTH GEORGE MASON DR.
809 S

City

FALLS CHURCH

State

VA

Zip Code

22041-3759

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

05 / 05 / 2018

Transaction ID : SA17.1213382

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CORMAN, JENNIFER, , ,

Mailing Address 30412 MARBELLA VISTA

City

SAN JUAN CAPISTRAN

State

CA

Zip Code

92675-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

WIFE/MOTHER/ACTRESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 06 / 2018

Transaction ID : SA17.1213891

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 143 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CORNWELL, JEFFREY, , ,

Mailing Address 29 NEWQUAY LN

City
BELLA VISTA

State
AR

Zip Code
72714-4608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHICK-FIL-A

Occupation (for Individual)
INVENTORY CONTROL

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
05 / 08 / 2018

Transaction ID : SA17.1214282

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. CORRAO, LUD, , ,

Mailing Address 2462 E. LAKERIDGE SHORES

City
RENO

State
NV

Zip Code
89519-5732

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

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212298

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CORRAO, LUD, , ,

Mailing Address 2462 E. LAKERIDGE SHORES

City
RENO

State
NV

Zip Code
89519-5732

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

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1223202

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 144 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CORTEZ, KELLY, , ,

Mailing Address 760, LAKESHORE DR.

City
DULUTH

State
GA

Zip Code
30096-3040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LIFE COACH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214617

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. COSTELLO, MARGARET, , ,

Mailing Address P.O. BOX 1252

City
CARMEL

State
CA

Zip Code
93921-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212687

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COURTNEY, SHERRY, , ,

Mailing Address 111 QUEENSGATE LN

City
CHARLOTTE

State
NC

Zip Code
28214-1146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEKSYSTEMS

Occupation (for Individual)
IT SECURITY ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212469

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

675.00

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

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

FOR LINE NUMBER: PAGE 145 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. COWAN, SALLY, , ,

Mailing Address 9235 CARRISBROOK LANE

City
BRENTWOOD

State
TN

Zip Code
37027-4884

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214283

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. COWGER, RONNIE, , ,

Mailing Address 3205 CORTEZ STREET

City
CARSON CITY

State
NV

Zip Code
89701-6112

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA17.1210243

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COWGER, RONNIE, , ,

Mailing Address 3205 CORTEZ STREET

City
CARSON CITY

State
NV

Zip Code
89701-6112

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216457

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

80.00

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

FOR LINE NUMBER: PAGE 146 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. COWGER, RONNIE, , ,

Mailing Address 3205 CORTEZ STREET

City
CARSON CITYState
NVZip Code
89701-6112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2018

Transaction ID : SA17.1216577

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CRANSTON, ROBERT, , ,

Mailing Address 303 QUAIL DR.

City
MARMORAState
NJZip Code
08223-1250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2018

Transaction ID : SA17.1214383

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CRANSTON, ROBERT, , ,

Mailing Address 303 QUAIL DR.

City
MARMORAState
NJZip Code
08223-1250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2018

Transaction ID : SA17.1221841

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

70.00

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

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

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

FOR LINE NUMBER: PAGE 147 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CROHN, STEVEN S, ,

Mailing Address 6041 E. INDIAN BEND RD.

City
PARADISE VALLEY

State
AZ

Zip Code
85253-3437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213731

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. CRUIKSHANK, THOMAS, ,

Mailing Address 4201 LOMO ALTO DR.
213

City
DALLAS

State
TX

Zip Code
75219-1543

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

05 / 01 / 2018

Transaction ID : SA17.1209956

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CUENOD, RONALD P, ,

Mailing Address 1283 NORTH POST OAK ROAD, SUITE 10

City
HOUSTON

State
TX

Zip Code
77055-7200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDUMAR PRODUCTS, INC.

Occupation (for Individual)
EXECUTIVE MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212148

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 148 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CUENOD, RONALD P, , ,

Mailing Address 1283 NORTH POST OAK ROAD, SUITE 10

City
HOUSTON

State
TX

Zip Code
77055-7200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDUMAR PRODUCTS, INC.

Occupation (for Individual)
EXECUTIVE MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA17.1222823

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CUENOD, RONALD P, , ,

Mailing Address 1283 NORTH POST OAK ROAD, SUITE 10

City
HOUSTON

State
TX

Zip Code
77055-7200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDUMAR PRODUCTS, INC.

Occupation (for Individual)
EXECUTIVE MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

05 / 29 / 2018

Transaction ID : SA17.1224249

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CUMMINS, JOAN, , ,

Mailing Address 6741 BIRCHTON POINT DRIVE #200

City
DUBLIN

State
OH

Zip Code
43017-7639

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

05 / 14 / 2018

Transaction ID : SA17.1217717

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 149 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CUMMINS, JOAN, , ,

Mailing Address 6741 BIRCHTON POINT DRIVE #200

City
DUBLIN

State
OH

Zip Code
43017-7639

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 Y Y
05 / 15 / 2018

Transaction ID : SA17.1218302

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CUMMINS, JOAN, , ,

Mailing Address 6741 BIRCHTON POINT DRIVE #200

City
DUBLIN

State
OH

Zip Code
43017-7639

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 Y Y
05 / 22 / 2018

Transaction ID : SA17.1222815

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210760

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 150 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1211097

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. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221414

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. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221415

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

105.00

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

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

FOR LINE NUMBER: PAGE 151 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221416

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. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1222849

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. CURTI, TONY, , ,

Mailing Address 1779 WELLS BRANCH PKWY STE 110B

City
AUSTIN

State
TX

Zip Code
78728-7022

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 ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1217067

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 152 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. CURTI, TONY, , ,

Mailing Address 1779 WELLS BRANCH PKWY STE 110B

City
AUSTIN

State
TX

Zip Code
78728-7022

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 ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA17.1223653

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. CURTI, TONY, , ,

Mailing Address 1779 WELLS BRANCH PKWY STE 110B

City
AUSTIN

State
TX

Zip Code
78728-7022

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 ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA17.1223984

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. CURTI, TONY, , ,

Mailing Address 1779 WELLS BRANCH PKWY STE 110B

City
AUSTIN

State
TX

Zip Code
78728-7022

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 ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA17.1224322

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

115.00

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

FOR LINE NUMBER: PAGE 153 OF 610

(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. D'ELIA, SERGE, , ,

Mailing Address 800 ANTLER DRIVE

City
CASPERState
WYZip Code
82601-1713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	21	2018

Transaction ID : SA17.1222229

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. DACORTE, TRINIDAD, , ,

Mailing Address 5907 CEDAR PATH

City
SAN ANTONIOState
TXZip Code
78249-3044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VETERANOccupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	27	2018

Transaction ID : SA17.1224082

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. DAVIS, CHRISTINE, , ,

Mailing Address 710 MARGARET STREET

City
SAN JOSEState
CAZip Code
95112-2309FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TMFC, INCOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212696

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 154 OF 610

(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

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

A. DAVIS, CLIFFORD, , ,

Mailing Address 2908 GABRIEL VIEW DRIVE

City
GEORGETOWN

State
TX

Zip Code
78628-2708

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209338

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DAVIS, CLIFFORD, , ,

Mailing Address 2908 GABRIEL VIEW DRIVE

City
GEORGETOWN

State
TX

Zip Code
78628-2708

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213365

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. DAVIS, JUDY, , ,

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213053

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 155 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DAVIS, JUDY, , ,

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1215064

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DAVIS, RANDY, , ,

Mailing Address 8780 PRESTIGE CT., .

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-5138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAVIS DEV.

Occupation (for Individual)
CONTRACTOR

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
05 / 05 / 2018

Transaction ID : SA17.1212583

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. DAWSON, SMITH, , ,

Mailing Address 8461 SW 36 STREET

City
MIAMI

State
FL

Zip Code
33155-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, ACTSYS DOOR SYSTEMS

Occupation (for Individual)
EXECUTIVE

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
05 / 05 / 2018

Transaction ID : SA17.1212545

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 156 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DE AMEZOLA, XAVIER, , ,

Mailing Address 12555 SE 69 AV. PINECREST

City
MIAMI

State
FL

Zip Code
33156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
R.E. BROKER

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
05 / 05 / 2018

Transaction ID : SA17.1212700

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. DEAKTER, MORRIS, , ,

Mailing Address 20281 E. COUNTRY CLUB DR.
2406

City
MIAMI

State
FL

Zip Code
33180-3010

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
05 / 05 / 2018

Transaction ID : SA17.1213131

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. DEAL, JOHNNY, , ,

Mailing Address 505 KING GP ROAD

City
HIGHLANDS

State
NC

Zip Code
28741-6654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLACK BEAR CONSTRUCTION

Occupation (for Individual)
SELF-OWNER

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
05 / 05 / 2018

Transaction ID : SA17.1211251

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 157 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DEAN, JEANINE, , ,

Mailing Address 6963 S DUNE HWY

City
EMPIRE

State
MI

Zip Code
49630-9447

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213328

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DEKKER, CURTIS, , ,

Mailing Address 17 SUNNYHILL WAY

City
PITTSBURG

State
CA

Zip Code
94565-5736

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213298

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. DELIQUINA, JAIME, , ,

Mailing Address 2674 WEBSTER AVE

City
LONG BEACH

State
CA

Zip Code
90810-3027

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213242

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 158 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DEMAGGIO, KATHLEEN, , ,

Mailing Address 425 ELLIS CREEK LANE

City
WEATHERFORD

State
TX

Zip Code
76085-1655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
GRAPHIC ARTIST

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
05 / 05 / 2018

Transaction ID : SA17.1211800

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DEMAGGIO, KATHLEEN, , ,

Mailing Address 425 ELLIS CREEK LANE

City
WEATHERFORD

State
TX

Zip Code
76085-1655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
GRAPHIC ARTIST

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
05 / 13 / 2018

Transaction ID : SA17.1217089

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. DEMOTTE, JOAN, , ,

Mailing Address 372 E. HARMONY WAY

City
SAN TAN VALLEY

State
AZ

Zip Code
85140-5308

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 Y
05 / 05 / 2018

Transaction ID : SA17.1211321

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 OF 610

(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. DENGLER, MARILYN, , ,

Mailing Address 2758 MORRIS AVE BRONX,NY

City
BRONXState
NYZip Code
10468-2872FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ASSET MGR

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
05	/	05	/	2018

Transaction ID : SA17.1213529

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DENISON, NELSON, C., MR.,

Mailing Address 2814 BIRDSEYE LANE

City
BOWIEState
MDZip Code
20715-3932FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1213564

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. DENNIS, RICHARD, , ,

Mailing Address 16513 COTTAGE GROVE AVENUE

City
SOUTH HOLLANDState
ILZip Code
60473-2347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	19	/	2018

Transaction ID : SA17.1220891

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 160 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DESILVA, PATHMANATH, , ,

Mailing Address 1936 BRUCE B DOWNS BLVD
176

City
WESLEY CHAPEL

State
FL

Zip Code
33544-9262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CAG LOGISTICS MANAGEMENT SERVICES

Occupation (for Individual)

BUSINESS OWNER

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
05 / 03 / 2018

Transaction ID : SA17.1210287

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DEWOODY, ELIZABETH, , ,

Mailing Address 131 ELLAMAR ROAD

City

WEST PALM BEACH

State

FL

Zip Code

33405-4166

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212521

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. DI LEO, TAMMELA, , ,

Mailing Address 1264 SEMINOLE DR.

City

FORT LAUDERDALE

State

FL

Zip Code

33304-1606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CAREGIVERS OF AMERICA

Occupation (for Individual)

ADMINISTRATOR

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
05 / 05 / 2018

Transaction ID : SA17.1212978

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 161 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DIAZ, TEDDY, , ,

Mailing Address 2919 E HILLSIDE DR.

City
WEST COVINA

State
CA

Zip Code
91791-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINE WAREHOUSE

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211285

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DIAZ, TEDDY, , ,

Mailing Address 2919 E HILLSIDE DR.

City
WEST COVINA

State
CA

Zip Code
91791-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINE WAREHOUSE

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214024

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIAZ, TEDDY, , ,

Mailing Address 2919 E HILLSIDE DR.

City
WEST COVINA

State
CA

Zip Code
91791-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINE WAREHOUSE

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219386

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DIFFENDERFER, KENT, , ,

Mailing Address 251 BUTTERCUP LANE

City
DYER

State
IN

Zip Code
46311-2791

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

05 / 05 / 2018

Transaction ID : SA17.1211488

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIFFENDERFER, KENT, , ,

Mailing Address 251 BUTTERCUP LANE

City
DYER

State
IN

Zip Code
46311-2791

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

05 / 21 / 2018

Transaction ID : SA17.1222382

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DILWORTH, FRANCES, , ,

Mailing Address 400 FM 534

City
SANDIA

State
TX

Zip Code
78383-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210447

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DIVER, MARY, , ,

Mailing Address 112 MAYA CIRCLE

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213044

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIVER, MARY, , ,

Mailing Address 112 MAYA CIRCLE

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214077

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIVER, MARY, , ,

Mailing Address 112 MAYA CIRCLE

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1214668

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DIVER, MARY, , ,

Mailing Address 112 MAYA CIRCLE

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218604

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIVER, MARY, , ,

Mailing Address 112 MAYA CIRCLE

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218624

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOANE, JOHN, , ,

Mailing Address 3900 WEST 57TH STREET

City
SHAWNEE MISSION

State
KS

Zip Code
66205-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISCOVER VISION CENTERS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2018

Transaction ID : SA17.1223667

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DOMBROW, JULIA, , ,

Mailing Address 325 RAMSEY ROAD

City
SAN BENITO

State
TX

Zip Code
78586-7009

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 ▼

750.00

Date of Receipt

05 / 02 / 2018

Transaction ID : SA17.1209994

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. DOMBROW, JULIA, , ,

Mailing Address 325 RAMSEY ROAD

City
SAN BENITO

State
TX

Zip Code
78586-7009

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 ▼

750.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211051

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. DOMBROW, JULIA, , ,

Mailing Address 325 RAMSEY ROAD

City
SAN BENITO

State
TX

Zip Code
78586-7009

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 ▼

750.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211405

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 610

(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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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

A. DONLEY, ED, , ,

Mailing Address 2742 WILDERNESS RD

City
CLAY CENTERState
KSZip Code
67432-9060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SALES. RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2018

Transaction ID : SA17.1217792

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DONLEY, ED, , ,

Mailing Address 2742 WILDERNESS RD

City
CLAY CENTERState
KSZip Code
67432-9060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SALES. RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2018

Transaction ID : SA17.1224027

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. DOUGHARTY, RALPH, , ,

Mailing Address 300 ST JOSEPH PKWY
APT 211City
HOUSTONState
TXZip Code
77002-8613FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S & B ENGINEERS AND CONSTRUCTORS, LTD.Occupation (for Individual)
ENGINEERING

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
05	/	01	/	2018

Transaction ID : SA17.1209468

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

155.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 167 OF 610
(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. DOUMAUX JR., ARTHUR R., , ,

Mailing Address 1401 WILKIE DRIVE

City
CHARLESTONState
WVZip Code
25314-1730FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212475

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. DOVE, HAVEN, , ,

Mailing Address 16830 S FORK RD

City
MOOREFIELDState
WVZip Code
26836-8059FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	4			2	0	1	8		

Transaction ID : SA17.1210347

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. DOWNING, ERIC, , ,

Mailing Address 11824 S 224TH ST

City
GRETNAState
NEZip Code
68028-4387FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WERNER ENTERPRISESOccupation (for Individual)
TRANSPORTATION

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212151

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).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DOWNS, DON, , ,

Mailing Address 9064 HELENA ROAD

City
PELHAM

State
AL

Zip Code
35124-2737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISTRIBUTION CONSULTING

Occupation (for Individual)
CONSULTING ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213597

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. DRANEY, JERALD, , ,

Mailing Address 4320 FOREST HILL DR, 104
237

City
FAIRFAX

State
VA

Zip Code
22030-5767

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 ▼

1140.00

Date of Receipt

05 / 07 / 2018

Transaction ID : SA17.1214176

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DRANEY, JERALD, , ,

Mailing Address 4320 FOREST HILL DR, 104
237

City
FAIRFAX

State
VA

Zip Code
22030-5767

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 ▼

1140.00

Date of Receipt

05 / 15 / 2018

Transaction ID : SA17.1217915

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DRANEY, JERALD, , ,

Mailing Address 4320 FOREST HILL DR, 104
237

City
FAIRFAX

State
VA

Zip Code
22030-5767

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 ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222170

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DRANEY, JERALD, , ,

Mailing Address 4320 FOREST HILL DR, 104
237

City
FAIRFAX

State
VA

Zip Code
22030-5767

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 ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018

Transaction ID : SA17.1222792

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DRANEY, JERALD, , ,

Mailing Address 4320 FOREST HILL DR, 104
237

City
FAIRFAX

State
VA

Zip Code
22030-5767

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 ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1222873

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DREW, BETTY, , ,

Mailing Address 23116 N. 145TH LN

City
SUN CITY WEST

State
AZ

Zip Code
85375-2769

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 ▼

325.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212549

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DREW, BETTY, , ,

Mailing Address 23116 N. 145TH LN

City
SUN CITY WEST

State
AZ

Zip Code
85375-2769

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 ▼

325.00

Date of Receipt

05 / 14 / 2018

Transaction ID : SA17.1217345

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUDZIK, ETHEL J., , ,

Mailing Address 2400 SIERRA VISTA

City
NEWPORT BEACH

State
CA

Zip Code
92660-3626

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

05 / 05 / 2018

Transaction ID : SA17.1213753

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. DUNCAN, POLA, , ,

Mailing Address 1459 DEAUVILLE PLACE

City
COSTA MESA

State
CA

Zip Code
92626-2627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211081

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. DUNCAN, THOMAS, , ,

Mailing Address 263 AIRPORT RD.

City
CEDARTOWN

State
GA

Zip Code
30125-5047

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

05 / 05 / 2018

Transaction ID : SA17.1213608

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. DUNN, CHERI, , ,

Mailing Address 1227 SANTA BARBARA DRIV

City
NEWPORT BEACH

State
CA

Zip Code
92660-6371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COAST

Occupation (for Individual)
ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212759

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 610

(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. DUNN, GARY, , ,

Mailing Address P.O. BOX 544

City
PLAINSState
KSZip Code
67869-0544FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
TRANSPORTATION

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
0	5			1	4			2	0	1	8		

Transaction ID : SA17.1217557

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENOState
NVZip Code
89503-2434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANYOccupation (for Individual)
CUSTOMER SERVICE REPRESENTA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

Transaction ID : SA17.1214477

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENOState
NVZip Code
89503-2434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANYOccupation (for Individual)
CUSTOMER SERVICE REPRESENTA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219188

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

265.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219189

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219336

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220487

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
05 / 18 / 2018

Transaction ID : SA17.1220488

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
05 / 19 / 2018

Transaction ID : SA17.1221195

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDSON, SAYO, , ,

Mailing Address 2000 KEYSTONE AVE

City
RENO

State
NV

Zip Code
89503-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON COMPANY

Occupation (for Individual)
CUSTOMER SERVICE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
05 / 19 / 2018

Transaction ID : SA17.1221196

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 175 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. EDWARDS, TOM, , ,

Mailing Address 2592 E WALKER LANE

City
SALT LAKE CITYState
UTZip Code
84117-7729FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1211539

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. EFURD, MARY, , ,

Mailing Address 440 INDEPENDENCE PKWY
2111City
PLANOState
TXZip Code
75075-8030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212195

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EICHHORN, KEITH, , ,

Mailing Address 1833 COUNTRY CLUB DRIVE

City
HIGH POINTState
NCZip Code
27262-4584FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1213135

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ELCHOUERI, CHARLES, , ,

Mailing Address 250 ASHLAND PLACE
APT PH1G

City
BROOKLYN

State
NY

Zip Code
11217-4300

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209766

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELCHOUERI, CHARLES, , ,

Mailing Address 250 ASHLAND PLACE
APT PH1G

City
BROOKLYN

State
NY

Zip Code
11217-4300

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA17.1217563

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELDRIDGE, ADELBERT E, , ,

Mailing Address 253 BUNKER RD.

City
ROTONDA WEST

State
FL

Zip Code
33947-2125

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
05 / 20 / 2018

Transaction ID : SA17.1221666

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 OF 610

(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. ELKON, YAAKOV, , ,Mailing Address 30 BROAD STREET
43RD. FLOORCity
NEW YORKState
NYZip Code
10004-2944FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GRAPHNET INC.Occupation (for Individual)
GRAPHNET INC.

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
05	/	15	/	2018

Transaction ID : SA17.1217856

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. ELLIOTT, DONALD G, , ,

Mailing Address 104 BENT OAK DR.

City
SAN ANTONIOState
TXZip Code
78231-1503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2018

Transaction ID : SA17.1209402

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMERSON, WALTER, , ,

Mailing Address 4255 BRENDAN LANE

City
NORTH OLMSTEDState
OHZip Code
44070-2923FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTINGHOUSEOccupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2018

Transaction ID : SA17.1216499

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. EMERSON, WALTER, , ,

Mailing Address 4255 BRENDAN LANE

City
NORTH OLMSTED

State
OH

Zip Code
44070-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTINGHOUSE

Occupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

05 / 15 / 2018

Transaction ID : SA17.1217929

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. EMERSON, WALTER, , ,

Mailing Address 4255 BRENDAN LANE

City
NORTH OLMSTED

State
OH

Zip Code
44070-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTINGHOUSE

Occupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220836

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. EMERSON, WALTER, , ,

Mailing Address 4255 BRENDAN LANE

City
NORTH OLMSTED

State
OH

Zip Code
44070-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTINGHOUSE

Occupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

05 / 31 / 2018

Transaction ID : SA17.1224676

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 610

(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. EMMONS, RON, , ,

Mailing Address P.O. BOX 12479

City
LA CRESCENTAState
CAZip Code
91224-5479FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	8		

Transaction ID : SA17.1218344

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMMONS, RON, , ,

Mailing Address P.O. BOX 12479

City
LA CRESCENTAState
CAZip Code
91224-5479FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	1	8		

Transaction ID : SA17.1224219

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESTES, MICHAEL, , ,

Mailing Address 116 JERICHO RIDGE

City
WALHALLAState
SCZip Code
29691-4019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
SMALL 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
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221758

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ETTINGER, RON, , ,

Mailing Address 295 GRANDE WAY
1204

City
NAPLES

State
FL

Zip Code
34110-6478

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220797

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ETTINGER, RON, , ,

Mailing Address 295 GRANDE WAY
1204

City
NAPLES

State
FL

Zip Code
34110-6478

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221472

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, DWIGHT, , ,

Mailing Address 9350 TIRANA TERRACE
#3

City
FORT MYERS

State
FL

Zip Code
33912-0927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RED SOX

Occupation (for Individual)
INSTRUCTOR

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
05 / 05 / 2018

Transaction ID : SA17.1210837

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. EVARTS, TERRIE, , ,

Mailing Address 3655 BIRCH STREET

City
BAKER CITY

State
OR

Zip Code
97814-1637

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 / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212922

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EWALD, EDDA, , ,

Mailing Address 2143 27TH STREET
C4

City
ASTORIA

State
NY

Zip Code
11105-3075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAMER/ESTÉE LAUDER CO

Occupation (for Individual)
SAKES

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
05 / 05 / 2018

Transaction ID : SA17.1212491

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. FAIELLO, SAM, J., ,

Mailing Address 7 SANDY RIDGE ROAD

City
STOCKTON

State
NJ

Zip Code
08559-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHORE WATER CO.

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212299

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 610

(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. FARLEY, PATRICIA R, , ,

Mailing Address 3150 SPRING LAKE DRIVE NE

City
CONYERSState
GAZip Code
30013-1448FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211537

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARLEY, PATRICIA R, , ,

Mailing Address 3150 SPRING LAKE DRIVE NE

City
CONYERSState
GAZip Code
30013-1448FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213822

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARLEY, PATRICIA R, , ,

Mailing Address 3150 SPRING LAKE DRIVE NE

City
CONYERSState
GAZip Code
30013-1448FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

Transaction ID : SA17.1223209

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 183 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FARRELL, KEVIN, , ,

Mailing Address 284 MARTIN RD

City
HAMLIN

State
NY

Zip Code
14464-9735

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WROTB

Occupation (for Individual)
PAINTER

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
05 / 24 / 2018

Transaction ID : SA17.1223384

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. FARRELL, RONALD, , ,

Mailing Address 8451 HIBISCUS CIRCLE

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-6800

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G&F ROOF SUPPLY

Occupation (for Individual)
PRESIDENT

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
05 / 11 / 2018

Transaction ID : SA17.1216159

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. FEIGENBAUM, ROBERT, , ,

Mailing Address 339 AVALON DRIVE

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211894

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FELSBURG, DR. DAVID F, , ,

Mailing Address 3006 PEAVINE TRAIL

City
LAKELAND

State
FL

Zip Code
33810-2336

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 ▼

405.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218479

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FENTON, MARTIN, , ,

Mailing Address 500 STEVENS AVENUE

City
SOLANA BEACH

State
CA

Zip Code
92075-2055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENIOR RESOURCE GROUP

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212364

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERNANDEZ, MARTA, , ,

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 ▼

1250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213809

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FERRELL, LISA, , ,

Mailing Address 1710 WILDFLOWER TRAIL

City
GRAPEVINE

State
TX

Zip Code
76051-8414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONESNEITZEL

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1212600

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIDDYMENT, KARYL, , ,

Mailing Address 6419 RIO DE ONAR WAY

City
ELK GROVE

State
CA

Zip Code
95757-3489

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

05 / **06** / **2018**

Transaction ID : SA17.1214014

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. FIDDYMENT, KARYL, , ,

Mailing Address 6419 RIO DE ONAR WAY

City
ELK GROVE

State
CA

Zip Code
95757-3489

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

05 / **20** / **2018**

Transaction ID : SA17.1221835

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 610

(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. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIOState
TXZip Code
78244-2073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

Transaction ID : SA17.1210026

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIOState
TXZip Code
78244-2073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211616

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIOState
TXZip Code
78244-2073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

Transaction ID : SA17.1214488

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215657

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218605

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218606

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220706

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220707

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

05 / 24 / 2018

Transaction ID : SA17.1223406

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA17.1224567

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIFE, ANITA, , ,

Mailing Address 4930 LAKEBEND EAST DR.

City
SAN ANTONIO

State
TX

Zip Code
78244-2073

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 ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

Transaction ID : SA17.1224629

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINN, DIANNA L., , ,

Mailing Address 27 THAMESVIEW RD.

City
NORWICH

State
CT

Zip Code
06360-7157

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
05 / 10 / 2018

Transaction ID : SA17.1215189

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 OF 610

(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. FISCALINI, EARL, , ,

Mailing Address 5220 W BRUNO CYN DR.

City
PRESCOTTState
AZZip Code
86305-9669FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

Transaction ID : SA17.1224319

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FISHER, IRENE, , ,

Mailing Address 16421 REDWOOD

City
CERRITOSState
CAZip Code
90703-1931FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210702

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. FITCH, JOHN, , ,

Mailing Address P.O. BOX 20323

City
CHEYENNEState
WYZip Code
82003-7008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

521.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	8		

Transaction ID : SA17.1214043

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 191 OF 610
(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. FITCH, JOHN, , ,

Mailing Address P.O. BOX 20323

City
CHEYENNEState
WYZip Code
82003-7008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	8		

Transaction ID : SA17.1221206

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FITCH, JOHN, , ,

Mailing Address P.O. BOX 20323

City
CHEYENNEState
WYZip Code
82003-7008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

Transaction ID : SA17.1222559

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FITCH, JOHN, , ,

Mailing Address P.O. BOX 20323

City
CHEYENNEState
WYZip Code
82003-7008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

521.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	8		

Transaction ID : SA17.1223719

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FITCH, JOHN, , ,

Mailing Address P.O. BOX 20323

City
CHEYENNE

State
WY

Zip Code
82003-7008

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 ▼

521.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA17.1223893

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FITE, DAVID BRUCE, , ,

Mailing Address 9745 MIRA DEL RIO DRIVE

City
SACRAMENTO

State
CA

Zip Code
95827-1320

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209861

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. FITE, DAVID BRUCE, , ,

Mailing Address 9745 MIRA DEL RIO DRIVE

City
SACRAMENTO

State
CA

Zip Code
95827-1320

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219011

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FLANIGAN, ED, , ,

Mailing Address 826 SW 355TH CT

City
FEDERAL WAY

State
WA

Zip Code
98023-8130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KELLER WILLIAMS

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212979

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLYNN, SUSAN, , ,

Mailing Address 5819 REDWOOD LANE

City
DALLAS

State
TX

Zip Code
75209-2423

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210921

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORKIN, JOHN, , ,

Mailing Address 8500 LEGENDS BLVD
301

City
FORT MYERS

State
FL

Zip Code
33912-7070

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
05 / 05 / 2018

Transaction ID : SA17.1213794

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FOSSUM, KENT C, , ,

Mailing Address 1518 TRAIL VIEW PLACE

City
NIPOMO

State
CA

Zip Code
93444-6619

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
05 / 05 / 2018

Transaction ID : SA17.1211071

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOSSUM, KENT C, , ,

Mailing Address 1518 TRAIL VIEW PLACE

City
NIPOMO

State
CA

Zip Code
93444-6619

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
05 / 20 / 2018

Transaction ID : SA17.1221435

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOSTER, LEONARD, , ,

Mailing Address 1316 GRINNELL DR.

City
RICHARDSON

State
TX

Zip Code
75081-5919

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219704

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FOSTER, LEONARD, , ,

Mailing Address 1316 GRINNELL DR.

City
RICHARDSON

State
TX

Zip Code
75081-5919

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221436

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. FRANKLIN, JOHN, , ,

Mailing Address 2301 AXMINSTER COURT

City
GRAND PRAIRIE

State
TX

Zip Code
75050-2002

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
05 / 05 / 2018

Transaction ID : SA17.1212067

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. FRANSSON, MARTHA, , ,

Mailing Address 11 DODGE DRIVE

City
WEST HARTFORD

State
CT

Zip Code
06107-1009

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215822

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FRASER, ETTA, , ,

Mailing Address 2101 TREASURE HILLS BLVD
432

City
HARLINGEN

State
TX

Zip Code
78550-8738

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 Y Y
05 / 05 / 2018

Transaction ID : SA17.1210739

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRASER, ETTA, , ,

Mailing Address 2101 TREASURE HILLS BLVD
432

City
HARLINGEN

State
TX

Zip Code
78550-8738

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 Y Y
05 / 22 / 2018

Transaction ID : SA17.1222476

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRASER, HUGH, , ,

Mailing Address 411 PENNINGTON RD

City
REIDSVILLE

State
NC

Zip Code
27320-7727

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212812

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 610

(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. FRENCH, CATHY, , ,

 Mailing Address 7648 BROADVIEW DR.
 101

 City
 HOUSTON

 State
 TX

 Zip Code
 77061-1606

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 GENNOA FRENCH ENTERPRISES, INC.

 Occupation (for Individual)
 SELF

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211125

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRENCH, CATHY, , ,

 Mailing Address 7648 BROADVIEW DR.
 101

 City
 HOUSTON

 State
 TX

 Zip Code
 77061-1606

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 GENNOA FRENCH ENTERPRISES, INC.

 Occupation (for Individual)
 SELF

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
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221459

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEL, JOHN, , ,

Mailing Address 5518 W ALDER ROSE CIR

 City
 HERRIMAN

 State
 UT

 Zip Code
 84096-3400

 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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210816

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. FRY, HAROLD, , ,

Mailing Address 605 N. WILLOW STREET

City
KENT

State
OH

Zip Code
44240-2620

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

05 / 03 / 2018

Transaction ID : SA17.1210152

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. FRY, HAROLD, , ,

Mailing Address 605 N. WILLOW STREET

City
KENT

State
OH

Zip Code
44240-2620

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

05 / 08 / 2018

Transaction ID : SA17.1214284

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. FRY, HAROLD, , ,

Mailing Address 605 N. WILLOW STREET

City
KENT

State
OH

Zip Code
44240-2620

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

05 / 14 / 2018

Transaction ID : SA17.1217784

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRYER, RICHARD, , ,

Mailing Address P O BOX 2813

City
WINTER PARK

State
FL

Zip Code
32790-2813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IFREC REAL ESTATE SCHOOLS

Occupation (for Individual)
REAL ESTATE SCHOOL OWNER

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
05 / 24 / 2018

Transaction ID : SA17.1223662

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. FULDNER, CHRIS, , ,

Mailing Address 6198 LAWRENCE 2240

City
MONETT

State
MO

Zip Code
65708-9504

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212194

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FURBUSH, JOHN, , ,

Mailing Address 45 ORILLS HILL RD

City
LEBANON

State
ME

Zip Code
04027-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TCS

Occupation (for Individual)
PROJECT MANAGER

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
05 / 05 / 2018

Transaction ID : SA17.1212219

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GALLAGHER, PATRICIA, , ,

Mailing Address 460 BEACH 134TH ST

City
ROCKAWAY PARK

State
NY

Zip Code
11694-1442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRICO PHARMACY

Occupation (for Individual)
PHARMACY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 13 / 2018

Transaction ID : SA17.1217093

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. GALLO, WAYNE, , ,

Mailing Address P.O. BOX 260167

City
LAKEWOOD

State
CO

Zip Code
80226-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LANDLORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211722

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GAMBLE, KENNETH, , ,

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)
SELF EMPLOYED

Occupation (for Individual)
INS BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210933

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GANDY, JUDI. L. , ,

Mailing Address PO B1304

City

BRYN MAWR

State

PA

Zip Code

19010

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
05 / 01 / 2018

Transaction ID : SA17.1209457

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARBETT, STEPHEN, , MR.,

Mailing Address 7090 COVENANT WOODS DR.
M-102

City

MECHANICSVILLE

State

VA

Zip Code

23111-7025

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
05 / 05 / 2018

Transaction ID : SA17.1212604

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. GARNER, JAMES, , ,

Mailing Address 20541 MT. AETNA ROAD

City

HAGERSTOWN

State

MD

Zip Code

21742-1140

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ARK FINANCIAL ADVISORS

Occupation (for Individual)

FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212352

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / 07 / 2018

Transaction ID : SA17.1214140

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA17.1214966

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218768

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220708

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220709

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVER

State
PA

Zip Code
17331-1358

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 ▼

340.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1221211

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 610

(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. GARRETT, WANDA, , ,

Mailing Address 928 SHERWOOD STREET

City
HANOVERState
PAZip Code
17331-1358FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M	D D	Y Y Y Y
05	25	2018

Transaction ID : SA17.1223723

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. GARTON III, HENRY A, , ,

Mailing Address 892 DAUPHIN ROAD

City
VINELANDState
NJZip Code
08361-6006FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARTON'S RIGGING INC.Occupation (for Individual)
OWNER CRANE COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	07	2018

Transaction ID : SA17.1214028

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. GAUSS, ERNEST C, , ,

Mailing Address 2128 CLUBHOUSE RD,

City
LAKELANDState
FLZip Code
33813-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1211287

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GAVIN, JOHN, , ,

Mailing Address 3 BHOIREANN LANE

City
YORK

State
ME

Zip Code
03909-5435

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221807

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEHERAN, JOHN, , ,

Mailing Address 105 CARRIAGE HILL CIR

City

SOUTHBOROUGH

State

MA

Zip Code

01772-1342

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
05 / 25 / 2018

Transaction ID : SA17.1223685

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. GEMMER, JOHN, , ,

Mailing Address 13719 N 560 E

City

SYRACUSE

State

IN

Zip Code

46567-7203

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 Y
05 / 05 / 2018

Transaction ID : SA17.1211481

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212132

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216272

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216446

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1218239

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220801

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELD

State
MI

Zip Code
48324-1338

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220802

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 610

(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. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELDState
MIZip Code
48324-1338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	18	/	2018

Transaction ID : SA17.1220803

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GERALDS, E. SUSAN, , ,

Mailing Address 2224 KIEV CT.

City
WEST BLOOMFIELDState
MIZip Code
48324-1338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	19	/	2018

Transaction ID : SA17.1221381

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GHISELLI, ANTONIO, , ,

Mailing Address 227 MONTEGO BAY DR.

City
EL PASOState
TXZip Code
79912-4411FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EL PASO ORTHOPEDIC SURGERY GROUPOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	02	/	2018

Transaction ID : SA17.1210132

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GHOSH, JEANIE, , ,

Mailing Address 14544 MARGATE ST #5

City
VAN NUYS

State
CA

Zip Code
91411-4099

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
05 / 21 / 2018

Transaction ID : SA17.122230

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. 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210715

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1217075

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 610

(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. GILBERT, MELISSA, , ,

Mailing Address 301 LAKE DR.

City
ADAState
OKZip Code
74820-4219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210956

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILL, WILLIAM, , ,

Mailing Address 5415 SUTTON PLACE

City

NEW ORLEANS

State

LA

Zip Code

70131-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211546

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILL, WILLIAM, , ,

Mailing Address 5415 SUTTON PLACE

City

NEW ORLEANS

State

LA

Zip Code

70131-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211944

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GILL, WILLIAM, , ,

Mailing Address 5415 SUTTON PLACE

City
NEW ORLEANS

State
LA

Zip Code
70131-5412

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
05 / 05 / 2018

Transaction ID : SA17.1212542

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILMARTIN, WILLIAM, , ,

Mailing Address 932 LAUREL

City
SAN MATEO

State
CA

Zip Code
94401-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
BUSINESS MAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213581

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLENDINNING, ANN, , ,

Mailing Address 318 S. BEACH RD.

City
HOBE SOUND

State
FL

Zip Code
33455-2605

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
05 / 22 / 2018

Transaction ID : SA17.1222547

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GOEHRINGER, BRIAN, , ,

Mailing Address 451 OCEANSIDE STREET

City

ISLIP TERRACE

State

NY

Zip Code

11752-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST IN SERVICE STAFFING SOLUTIONS

Occupation (for Individual)

BUSINESS OWNER

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
05 / 05 / 2018

Transaction ID : SA17.1213237

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. GOMEZ, RENE J, , ,

Mailing Address 8950 SW 74 CT
1404

City

MIAMI

State

FL

Zip Code

33156-3173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

PHYSICIAN

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
05 / 12 / 2018

Transaction ID : SA17.1216558

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. GOODRICH, LINDA, , ,

Mailing Address P.O. BOX 602

City

NORTHVILLE

State

NY

Zip Code

12134-0602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INTERIM HEALTHCARE

Occupation (for Individual)

R.N.

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
05 / 05 / 2018

Transaction ID : SA17.1213842

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GOODSON, BOYD, , ,

Mailing Address 702 POPLAR ST.

City
GREENVILLE

State
IL

Zip Code
62246-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221845

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODYEAR, PRISCILLA, , ,

Mailing Address 10042 SIGNET CIRCLE

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

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

05 / 08 / 2018

Transaction ID : SA17.1214369

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. GOODYEAR, PRISCILLA, , ,

Mailing Address 10042 SIGNET CIRCLE

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

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

05 / 12 / 2018

Transaction ID : SA17.1216831

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GOODYEAR, PRISCILLA, , ,

Mailing Address 10042 SIGNET CIRCLE

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

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

05 / 20 / 2018

Transaction ID : SA17.1221799

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210686

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211003

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211007

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212102

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212992

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213841

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOSS, DEAN, , ,

Mailing Address 509 WEST EAGLE TERRACE

City
GREEN BAY

State
WI

Zip Code
54313-5122

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220106

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAY, ANTHONY, , ,

Mailing Address 3065 SW MONTEBELLO PL

City
PALM CITY

State
FL

Zip Code
34990-2635

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
05 / 05 / 2018

Transaction ID : SA17.1210817

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 610

(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. GRAY, JAMES, , ,

Mailing Address 14455 PRESTON ROAD
102City
DALLASState
TXZip Code
75254-8539FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

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
05 / 28 / 2018

Transaction ID : SA17.1224108

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. GRAY, ROBERT, , ,

Mailing Address 2516 NISH ROAD

City
CRYSTAL LAKEState
ILZip Code
60012-1511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05 / 05 / 2018

Transaction ID : SA17.1211904

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREBE, ROBERT, , ,

Mailing Address 224 COOK LN.
P.O. BOX 728City
CENTER POINTState
TXZip Code
78010-5439FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216873

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GREEN, BRADFORD, , ,

Mailing Address 7450 OLIVETAS AVE.
APT. 236

City
LA JOLLA

State
CA

Zip Code
92037-4924

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 Y
05 / 08 / 2018

Transaction ID : SA17.1214403

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREENO, MALCOLM, , ,

Mailing Address 333 OSPREY POINT DRIVE

City
OSPREY

State
FL

Zip Code
34229-9252

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
05 / 05 / 2018

Transaction ID : SA17.1212162

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. GREEN, SUSAN, , ,

Mailing Address 8700 SW 26TH AVE
STE R

City
PORTLAND

State
OR

Zip Code
97219-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TDM,INC./AD-HOLD

Occupation (for Individual)
VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2018

Transaction ID : SA17.1213973

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GROH, BARBARA, , ,

Mailing Address 6400 SHAWNEE PINES

City
CINCINNATI

State
OH

Zip Code
45243-3154

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

05 / 05 / 2018

Transaction ID : SA17.1211892

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. GRUBBS, JANIECE, , ,

Mailing Address 9704 PAVILION DR.

City
BAKERSFIELD

State
CA

Zip Code
93312-5988

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

05 / 01 / 2018

Transaction ID : SA17.1209304

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. GUERIN, JOHN, , ,

Mailing Address 181 HILLSIDE TERRACE

City
KINGSTON

State
NY

Zip Code
12401-6129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213565

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. GUIDRY, LORI, , ,

Mailing Address 5406 W. 149TH PLACE #1

City
HAWTHORNE

State
CA

Zip Code
90250-9446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEVELOPMENT INDUSTRIES, INC.

Occupation (for Individual)
DEVELOPMENT INDUSTRIES, INC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213661

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. HAAS, GLEN, RICHARD, ,

Mailing Address 880 OPEN SKY COURT

City
ALLEN

State
TX

Zip Code
75013-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARAGIO SOLUTIONS

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213284

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. HAAVE, RON, , ,

Mailing Address 18006 B ST EAST

City
SPANAWAY

State
WA

Zip Code
98387-8316

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

05 / 27 / 2018

Transaction ID : SA17.1224003

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 610

(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. HAECHTEN, MARK, , ,

Mailing Address BOX 547

City
VERIBESTState
TXZip Code
76886-0547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
HAECHTEN CROP INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	1		2	0	1	8		

Transaction ID : SA17.1215361

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAECHTEN, MARK, , ,

Mailing Address BOX 547

City
VERIBESTState
TXZip Code
76886-0547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
HAECHTEN CROP INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	3		2	0	1	8		

Transaction ID : SA17.1222850

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. HAECHERL, MICHAEL, , ,

Mailing Address 1809 WESTWOOD ESTATES DRIVE

City
ELK CITYState
OKZip Code
73644-2287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ANESTHESIA PROVIDER

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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1213532

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 610

(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. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	5							1	2			2	0	1	8

Transaction ID : SA17.1216512

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5							1	6			2	0

Transaction ID : SA17.1218562

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5							1	6			2	0

Transaction ID : SA17.1218563

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 610

(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. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219763

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221661

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAGANS, BONNIE J., , ,

Mailing Address P.O. BOX 518

City
MORRILTONState
ARZip Code
72110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1221940

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HAGGERTY, OLGA, , ,

Mailing Address 18 MISTY PEAKS COURT

City
LAS VEGAS

State
NV

Zip Code
89135-7857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TC NEVADA LLC

Occupation (for Individual)
MANAGER

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
05 / 05 / 2018

Transaction ID : SA17.1210713

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. HALL, BONNIE, , ,

Mailing Address 5925 POORHOUSE RD
POB 1214

City
VICTORIA

State
VA

Zip Code
23974-2402

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214592

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. HALL, BONNIE, , ,

Mailing Address 5925 POORHOUSE RD
POB 1214

City
VICTORIA

State
VA

Zip Code
23974-2402

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1223263

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HALLBERG, LORENE, , ,

Mailing Address 3209 CONCORD WAY

City
PLANT CITY

State
FL

Zip Code
33566-9511

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

05 / 05 / 2018

Transaction ID : SA17.1212635

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. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209409

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

05 / 02 / 2018

Transaction ID : SA17.1210095

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210406

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210407

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218564

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219345

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219346

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRIS

State
TN

Zip Code
37828-0065

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221019

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 610

(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. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRISState
TNZip Code
37828-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

Transaction ID : SA17.1222501

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRISState
TNZip Code
37828-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

Transaction ID : SA17.1222502

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRISState
TNZip Code
37828-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	8		

Transaction ID : SA17.1222503

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. HAMMER, DONALD, , ,

Mailing Address P.O. BOX 65

City
NORRISState
TNZip Code
37828-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

Transaction ID : SA17.1224656

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANG, JAMES, , ,

Mailing Address 1012 NORTH JEFFERSON

City
MOUNT PLEASANTState
TXZip Code
75455-3262FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MANAGEROccupation (for Individual)
SALE EMPLOYER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210748

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANG, JAMES, , ,

Mailing Address 1012 NORTH JEFFERSON

City
MOUNT PLEASANTState
TXZip Code
75455-3262FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MANAGEROccupation (for Individual)
SALE EMPLOYER

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
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1221989

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 610

(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. HANKLA, JAMES, , ,

Mailing Address 6028 AVENIDA DE CASTILLO

City
LONG BEACHState
CAZip Code
90803-2004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213576

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANKLA, JAMES, , ,

Mailing Address 6028 AVENIDA DE CASTILLO

City
LONG BEACHState
CAZip Code
90803-2004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	4			2	0	1	8		

Transaction ID : SA17.1223419

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANNA, MITCHELL, , ,

Mailing Address 22410 EGBERT HILL DR.

City
GRASS VALLEYState
CAZip Code
95949-8997FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUTTER HEALTHOccupation (for Individual)
HOSPITAL CEO

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212470

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 610

(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. HANNON, CAROL, , ,

Mailing Address 181 EMERALD RD SW

City
CARROLLTONState
OHZip Code
44615-9503FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1211256

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, BEVERLY, , ,

Mailing Address 2325 NORTH WARNER DRIVE

City
APACHE JUNCTIONState
AZZip Code
85120-1301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	13	/	2018

Transaction ID : SA17.1217078

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. HANSEN, JOE, , ,

Mailing Address 380 HIGHLAND HILLS DRIVE

City
CAMARILLOState
CAZip Code
93010-1247FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
METAL FINISHING

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
05	/	15	/	2018

Transaction ID : SA17.1217836

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HANSEN, WILLIAM, , ,

Mailing Address 3464 DOWNING AVE.

City
GLENDALE

State
CA

Zip Code
91208-1507

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

05 / 05 / 2018

Transaction ID : SA17.1211760

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, WILLIAM, , ,

Mailing Address 3464 DOWNING AVE.

City
GLENDALE

State
CA

Zip Code
91208-1507

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

05 / 05 / 2018

Transaction ID : SA17.1211921

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANSON, RICHARD G, , ,

Mailing Address 192 BOUTWELL CT N

City
STILLWATER

State
MN

Zip Code
55082-8453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ECS, LLC

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212584

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 610

(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. HARKIN, GERARD, , ,

Mailing Address 20 CUBBERLY PLACE

City
STATEN ISLANDState
NYZip Code
10306-1917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209845

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKIN, GERARD, , ,

Mailing Address 20 CUBBERLY PLACE

City
STATEN ISLANDState
NYZip Code
10306-1917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220108

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARMON, LLOYD, , ,

Mailing Address P.O. BOX 180359

City
CORONADOState
CAZip Code
92178-0359FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212675

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 610

(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. HARRIS, ERNEST EJ, , ,

Mailing Address P.O. BOX 1327

City
BENTONState
ARZip Code
72018-1327FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	5			2	0	1	8		

Transaction ID : SA17.1223751

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. HARRIS, SUE, , ,

Mailing Address 17031 WESTBURY RD

City
BEAUMONTState
TXZip Code
77713-2056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1221941

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARTKE, WAYNE, , ,

Mailing Address 9325 INDEPENDENCE

City
FORT MYERSState
FLZip Code
33913-7078FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
B-HOccupation (for Individual)
CONSTRUCTION

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
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209534

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARTKE, WAYNE, , ,

Mailing Address 9325 INDEPENDENCE

City
FORT MYERS

State
FL

Zip Code
33913-7078

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

B-H

Occupation (for Individual)

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1222006

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARTKE, WAYNE, , ,

Mailing Address 9325 INDEPENDENCE

City
FORT MYERS

State
FL

Zip Code
33913-7078

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

B-H

Occupation (for Individual)

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / **28** / **2018**

Transaction ID : SA17.1224157

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARTSHORN, SHARON, , ,

Mailing Address 7969 SUNRISE LOOP

City
PARK CITY

State
UT

Zip Code
84098-6258

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

05 / **05** / **2018**

Transaction ID : SA17.1212361

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. HARTSHORN, SHARON, , ,

Mailing Address 7969 SUNRISE LOOP

City
PARK CITYState
UTZip Code
84098-6258FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212569

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. HASENJAEGER, CAROLYN, , ,

Mailing Address 20645 ADAM CIRCLE

City
YORBA LINDAState
CAZip Code
92886-4599FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213673

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. HATEM, MSGT, USAF, RET., JOHN G, , ,

Mailing Address 916 HAMBURG DR.

City
ABINGDONState
MDZip Code
21009-2731FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212755

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HATEM, MSGT, USAF, RET., JOHN G, , ,

Mailing Address 916 HAMBURG DR.

City
ABINGDON

State
MD

Zip Code
21009-2731

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

05 / 05 / 2018

Transaction ID : SA17.1213015

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HATEM, MSGT, USAF, RET., JOHN G, , ,

Mailing Address 916 HAMBURG DR.

City
ABINGDON

State
MD

Zip Code
21009-2731

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

05 / 06 / 2018

Transaction ID : SA17.1213943

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HATEM, MSGT, USAF, RET., JOHN G, , ,

Mailing Address 916 HAMBURG DR.

City
ABINGDON

State
MD

Zip Code
21009-2731

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

05 / 11 / 2018

Transaction ID : SA17.1215382

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HATEM, MSGT, USAF, RET., JOHN G., ,

Mailing Address 916 HAMBURG DR.

City
ABINGDON

State
MD

Zip Code
21009-2731

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

05 / 14 / 2018

Transaction ID : SA17.1217427

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAUG, PETER, , ,

Mailing Address 725 9TH AVE
2506

City
SEATTLE

State
WA

Zip Code
98104-2051

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

05 / 14 / 2018

Transaction ID : SA17.1217349

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAWKINS, PATRICIA, , ,

Mailing Address 17130 MCRAE RD. NW

City
ARLINGTON

State
WA

Zip Code
98223-8089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FOOD SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211133

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HAYDEN, MARILYN, , ,

Mailing Address 10306 E. CALLE DE LAS BRISAS

City
SCOTTSDALE

State
AZ

Zip Code
85255-3762

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
05 / 01 / 2018

Transaction ID : SA17.1209957

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEAD, JIMMY, , ,

Mailing Address 30197 TENAYA LN

City
HIGHLAND

State
CA

Zip Code
92346-7734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
AMWAY SELF EMPLOYED

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
05 / 05 / 2018

Transaction ID : SA17.1211074

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. HEBERGER, AUSTIN, , ,

Mailing Address 40 ENTRADA DESCANSO

City
SANTA FE

State
NM

Zip Code
87506-7711

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
05 / 05 / 2018

Transaction ID : SA17.1211855

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 OF 610

(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. HEEREN, DENNIS, , ,

Mailing Address 21985 PHILIP DR.

City

LEONARDTOWN

State

MD

Zip Code

20650-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

US NAVY

Occupation (for Individual)

MGR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211021

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. HENNING, PAUL, , ,

Mailing Address 6210, MAHALA DR.

City

CARMICHAEL

State

CA

Zip Code

95608-5211

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

TRUCK DRIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2018

Transaction ID : SA17.1218030

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. HENSARLING, JANICE, , ,

Mailing Address 298 CR 392

City

NACOGDOCHES

State

TX

Zip Code

75961-7190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SFASU

Occupation (for Individual)

NURSE

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2018

Transaction ID : SA17.1209277

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HENSARLING, JANICE, , ,

Mailing Address 298 CR 392

City
NACOGDOCHES

State
TX

Zip Code
75961-7190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SFASU

Occupation (for Individual)
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213771

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERMANN, SIGWULF, , ,

Mailing Address 3000 W. HAYES ST

City
SEATTLE

State
WA

Zip Code
98199-4250

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
05 / 05 / 2018

Transaction ID : SA17.1212440

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. HERNANDEZ, FEDERICO, , ,

Mailing Address 6050 STETSON HILLS BLVD.
#113

City
COLORADO SPRINGS

State
CO

Zip Code
80923-3571

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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA17.1210123

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HERNANDEZ, FEDERICO, , ,

Mailing Address 6050 STETSON HILLS BLVD.
#113

City
COLORADO SPRINGS

State
CO

Zip Code
80923-3571

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 ▼

405.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210974

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNANDEZ, FEDERICO, , ,

Mailing Address 6050 STETSON HILLS BLVD.
#113

City
COLORADO SPRINGS

State
CO

Zip Code
80923-3571

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 ▼

405.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA17.1215141

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNANDEZ, FEDERICO, , ,

Mailing Address 6050 STETSON HILLS BLVD.
#113

City
COLORADO SPRINGS

State
CO

Zip Code
80923-3571

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 ▼

405.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA17.1222937

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HEUSSER, SYDNEY, , ,

Mailing Address P.O.BOX 1658

City
DAWSONVILLE

State
GA

Zip Code
30534-0030

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 ▼

360.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210883

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. HEUSSER, SYDNEY, , ,

Mailing Address P.O.BOX 1658

City
DAWSONVILLE

State
GA

Zip Code
30534-0030

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 ▼

360.00

Date of Receipt

05 / 09 / 2018

Transaction ID : SA17.1214577

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEUSSER, SYDNEY, , ,

Mailing Address P.O.BOX 1658

City
DAWSONVILLE

State
GA

Zip Code
30534-0030

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 ▼

360.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220811

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. HEUSSER, SYDNEY, , ,

Mailing Address P.O.BOX 1658

City
DAWSONVILLEState
GAZip Code
30534-0030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : SA17.1221800

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HICKS, STEVEN, , ,

Mailing Address 210 EAST BEECH STREET

City
SKIATOOKState
OKZip Code
74070-2314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GIBSONS ENERGYOccupation (for Individual)
CRUDE TRANSPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : SA17.1214195

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. HICKS, STEVEN, , ,

Mailing Address 210 EAST BEECH STREET

City
SKIATOOKState
OKZip Code
74070-2314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GIBSONS ENERGYOccupation (for Individual)
CRUDE TRANSPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2018

Transaction ID : SA17.1214495

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 245 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HICKS, STEVEN, , ,

Mailing Address 210 EAST BEECH STREET

City
SKIATOOK

State
OK

Zip Code
74070-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GIBSONS ENERGY

Occupation (for Individual)
CRUDE TRANSPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221558

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. HIGGINS, DENZLE, , ,

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

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221463

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIGGINBOTHAM, LOU, , ,

Mailing Address 4304 WESTWAY AVE.

City
DALLAS

State
TX

Zip Code
75205-3728

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 ▼

245.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209264

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HIGGINBOTHAM, LOU, , ,

Mailing Address 4304 WESTWAY AVE.

City
DALLAS

State
TX

Zip Code
75205-3728

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1223264

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIGGINBOTHAM, LOU, , ,

Mailing Address 4304 WESTWAY AVE.

City
DALLAS

State
TX

Zip Code
75205-3728

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2018

Transaction ID : SA17.1224224

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIGHFILL, JERALYN, , ,

Mailing Address 3008 BERKSHIRE COVE

City
JONESBORO

State
AR

Zip Code
72401-8087

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
05 / 05 / 2018

Transaction ID : SA17.1213238

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 OF 610

(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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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

A. HIGLEY, JON, , ,

Mailing Address 5313 24TH AVE. NE

City
TACOMAState
WAZip Code
98422-4514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1213449

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, EARL, , ,

Mailing Address 38092 SHERWOOD

City
WESTLANDState
MIZip Code
48185-3318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORDOccupation (for Individual)
PIPEFITTER

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
05	/	07	/	2018

Transaction ID : SA17.1214160

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIROTA, GEORGE, , ,

Mailing Address 11208 CAROLYN PLACE

City
CERRITOSState
CAZip Code
90703-5562FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1212369

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HJELLE, CLAYTON, , ,

Mailing Address 33745 160TH AVE NW

City
NEWFOLDEN

State
MN

Zip Code
56738-9250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ROOFING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211059

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HJELLE, CLAYTON, , ,

Mailing Address 33745 160TH AVE NW

City
NEWFOLDEN

State
MN

Zip Code
56738-9250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ROOFING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213112

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLCOMB, RAYMOND, , ,

Mailing Address P.O.BOX 263

City
RESACA

State
GA

Zip Code
30735-0263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GORDON COUNTY SHERIFF'S OFFICE

Occupation (for Individual)
LAW ENFORCEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212546

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HOLDREN, YVONNE, , ,

Mailing Address 7465 E. STONE CREEK LANE

City
ANAHEIM

State
CA

Zip Code
92808-1367

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 / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209275

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. HOSMER, WILLIAMHOSMERR, , ,

Mailing Address 5167 E. TIMROD S.

City
TUCSON

State
AZ

Zip Code
85711-7417

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 / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221058

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSMER, WILLIAMHOSMERR, , ,

Mailing Address 5167 E. TIMROD S.

City
TUCSON

State
AZ

Zip Code
85711-7417

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 / D D / Y Y Y Y Y Y
05 / 28 / 2018

Transaction ID : SA17.1224159

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HOULIHAN, SONNIE, , ,

Mailing Address 1513 WOODLAND ROAD

City
SALISBURY

State
MD

Zip Code
21801-6738

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 / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215323

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. HOULIHAN, SONNIE, , ,

Mailing Address 1513 WOODLAND ROAD

City
SALISBURY

State
MD

Zip Code
21801-6738

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 / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1217992

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUBBARD, RUSSELL, , ,

Mailing Address 124 WINDING CANYON LANE

City
FOLSOM

State
CA

Zip Code
95630-5006

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211477

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HUBNER, WILLIAM F, , ,

Mailing Address 7091 ORCHARD LAKE RD.
SUITE 300

City
WEST BLOOMFIELD

State
MI

Zip Code
48322-3652

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 Y
05 / 09 / 2018

Transaction ID : SA17.1214521

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUFFMAN, PHIL, , ,

Mailing Address 550 CULBREATH RD

City
COVINGTON

State
TN

Zip Code
38019-7404

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 Y
05 / 25 / 2018

Transaction ID : SA17.1223686

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUGO, MANUEL, , ,

Mailing Address 124 JOCKEY HOLLOWAY

City
UNION

State
NJ

Zip Code
07083-4157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213318

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 252 OF 610

(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. HULLINGER, WILLIAM, , ,

Mailing Address 7180 DEL RICO CT

City
PALO CEDROState
CAZip Code
96073-9612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212641

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HULLINGER, WILLIAM, , ,

Mailing Address 7180 DEL RICO CT

City
PALO CEDROState
CAZip Code
96073-9612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213577

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNG, CELIA, , ,

Mailing Address 1057 OLD MILL ROAD

City
SAN MARINOState
CAZip Code
91108-1839FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ICM RESOURCES INC.Occupation (for Individual)
REAL ESTATE

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212902

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. HUNT, PATTY, , ,

Mailing Address 216 HARNED RD

City
COMMACK

State
NY

Zip Code
11725-4204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TXX

Occupation (for Individual)
CEO

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
05 / 05 / 2018

Transaction ID : SA17.1212620

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. HUNT, STEPHEN, , ,

Mailing Address 1401 S JOYCE ST APT 1401

City
ARLINGTON

State
VA

Zip Code
22202-1883

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

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA17.1210280

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. HUNT, STEPHEN, , ,

Mailing Address 1401 S JOYCE ST APT 1401

City
ARLINGTON

State
VA

Zip Code
22202-1883

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

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222187

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 610

(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. HUNTER, BILL, , ,

Mailing Address 1433 AUXBURY PLACE

City
MURFREESBOROState
TNZip Code
37129-6067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213163

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTTO, TINA, , ,

Mailing Address 4563 FM 3135 E

City
HENDERSONState
TXZip Code
75652-2339FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WAL MARTOccupation (for Individual)
STORE MGR

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
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209756

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IRWIN, JANE, , ,

Mailing Address 307 MONTANA LANDING

City
POLSONState
MTZip Code
59860-8954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213187

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. JABLONSKI, JERZY, , ,

Mailing Address 114 FOXHALL LN.

City
PALM COASTState
FLZip Code
32137-4457FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209473

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JABLONSKI, JERZY, , ,

Mailing Address 114 FOXHALL LN.

City
PALM COASTState
FLZip Code
32137-4457FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	8		

Transaction ID : SA17.1214658

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. JAIRALA, CELIA, , ,

Mailing Address 327 EDGEVALE

City
BARKSDALEState
TXZip Code
78828FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
FRANCHISE OWNER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213705

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 256 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JAMISON, PEGGY, , ,

Mailing Address 80 CANDY DRIVE

City
OROVILLE

State
CA

Zip Code
95966-9429

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

05 / 05 / 2018

Transaction ID : SA17.1211414

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. JEHL, JAMES, , ,

Mailing Address P.O. BOX 1929

City
BIRMINGHAM

State
MI

Zip Code
48012-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SACHSE CONSTRUCTION

Occupation (for Individual)
SENIOR OROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213024

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. JENNINGS, GLORIA, , ,

Mailing Address 61 E. ANDERSON LANE

City
SHELTON

State
WA

Zip Code
98584-7318

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 ▼

440.00

Date of Receipt

05 / 08 / 2018

Transaction ID : SA17.1214275

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 257 OF 610
(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. JENNINGS, GLORIA, , ,

Mailing Address 61 E. ANDERSON LANE

City
SHELTONState
WAZip Code
98584-7318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5					1		2	0	1	8		

Transaction ID : SA17.1215197

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENNINGS, GLORIA, , ,

Mailing Address 61 E. ANDERSON LANE

City
SHELTONState
WAZip Code
98584-7318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5					1		2	0	1	8		

Transaction ID : SA17.1215263

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JENSEN, SUZANNE, , ,

Mailing Address 17931 NW GILBERT LN.

City
PORTLANDState
ORZip Code
97229-8538FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

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
0	5					3		2	0	1	8		

Transaction ID : SA17.1210150

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JENSEN, SUZANNE, , ,

Mailing Address 17931 NW GILBERT LN.

City
PORTLAND

State
OR

Zip Code
97229-8538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218516

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JETTON, ANN, , ,

Mailing Address 32533 SW JULIETTE DR.

City
WILSONVILLE

State
OR

Zip Code
97070-7401

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

05 / 05 / 2018

Transaction ID : SA17.1213582

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, FRITZ, , ,

Mailing Address 121 N. POST OAK LN
1603

City
HOUSTON

State
TX

Zip Code
77024-7720

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

05 / 10 / 2018

Transaction ID : SA17.1214655

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 610

(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. JOHNSON, FRITZ, , ,

Mailing Address 121 N. POST OAK LN
1603City
HOUSTONState
TXZip Code
77024-7720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	5			2	0	1	8		

Transaction ID : SA17.1218346

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, HELEN, , ,

Mailing Address 2620 HALF MOON WALK

City
NAPLESState
FLZip Code
34102-7750FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213243

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, JACK, , ,

Mailing Address 8 WILLOWMERE DR.

City
BARRINGTONState
ILZip Code
60010-6100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IHMA, INCOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212937

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JOHNSTON, JAMES, , ,

Mailing Address 27994 RED PINE CT

City
VALENCIA

State
CA

Zip Code
91354-1888

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

05 / **16** / **2018**

Transaction ID : SA17.1218891

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, JESSE, , ,

Mailing Address 5202 SILVERADO WAY

City
VALRICO

State
FL

Zip Code
33596-8263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COCHISE MTS

Occupation (for Individual)
PRES/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **28** / **2018**

Transaction ID : SA17.1224139

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSTON, KATHERINE, , ,

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 ▼

250.00

Date of Receipt

05 / **12** / **2018**

Transaction ID : SA17.1216872

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSEN, ODD-BJORN, , ,

Mailing Address 6 SUMMER BREEZE

City
IRVINE

State
CA

Zip Code
92603-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210997

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. JOHNSEN, ODD-BJORN, , ,

Mailing Address 6 SUMMER BREEZE

City
IRVINE

State
CA

Zip Code
92603-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211288

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. JOHNSEN, ODD-BJORN, , ,

Mailing Address 6 SUMMER BREEZE

City
IRVINE

State
CA

Zip Code
92603-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211780

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 262 OF 610

(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. JOHNSEN, ODD-BJORN, , ,

Mailing Address 6 SUMMER BREEZE

City
IRVINEState
CAZip Code
92603-3752FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	2		2	0	1	8		

Transaction ID : SA17.1222649

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. JOHNSON, THOMAS, , ,

Mailing Address W 10154 COUNTY ROAD K

City
LODIState
WIZip Code
53555-9462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	2		2	0	1	8		

Transaction ID : SA17.1210133

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. JOHNSON, WILLIAM, , ,

Mailing Address 13691 METRO PKWY
STE. 250City
FORT MYERSState
FLZip Code
33912-4350FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	2		2	0	1	8		

Transaction ID : SA17.1209998

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JONES, DAVID, , ,

Mailing Address P.O. BOX 712

City
DEMING

State
NM

Zip Code
88031-0712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
RANCHER

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
05 / 05 / 2018

Transaction ID : SA17.1213503

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. JONES, HENRY, , ,

Mailing Address 01 E 27TH AVE

City
CORDELE

State
GA

Zip Code
31015

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
05 / 25 / 2018

Transaction ID : SA17.1223697

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. JONES, IRVIN, , ,

Mailing Address BOX 491

City
LOVINGSTON

State
VA

Zip Code
22949-0491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DATASOLUTIONSCORP (DSC) DSCINV.COM

Occupation (for Individual)
CORPORATE CEO

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
05 / 05 / 2018

Transaction ID : SA17.1213164

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JONES, LEONARD, , ,

Mailing Address 3312 LAKESHORE DRIVE

City
CHAMPAIGN

State
IL

Zip Code
61822-5206

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

05 / 12 / 2018

Transaction ID : SA17.1216582

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. JONES, PAMELA, , ,

Mailing Address 2930 W TAMBAY AVE

City
TAMPA

State
FL

Zip Code
33611-1626

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

05 / 05 / 2018

Transaction ID : SA17.1212850

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. JONES, RICHARD, , ,

Mailing Address 12916 BAY PLANTATION DR.

City
JACKSONVILLE

State
FL

Zip Code
32223-0784

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

05 / 05 / 2018

Transaction ID : SA17.1212222

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JONES, SUSAN, , ,

Mailing Address 1317 S REISNER ST

City
INDIANAPOLIS

State
IN

Zip Code
46221-1634

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

05 / 01 / 2018

Transaction ID : SA17.1209343

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. JONES, SUSAN, , ,

Mailing Address 1317 S REISNER ST

City
INDIANAPOLIS

State
IN

Zip Code
46221-1634

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

05 / 05 / 2018

Transaction ID : SA17.1211804

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, SUSAN, , ,

Mailing Address 1317 S REISNER ST

City
INDIANAPOLIS

State
IN

Zip Code
46221-1634

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

05 / 05 / 2018

Transaction ID : SA17.1211999

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. JONES, SUSAN, , ,

Mailing Address 1317 S REISNER ST

City
INDIANAPOLIS

State
IN

Zip Code
46221-1634

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

05 / 05 / 2018

Transaction ID : SA17.1213064

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JORDAN, LAWRENCE, , ,

Mailing Address 5105 HY 59 NORTH

City
LUFKIN

State
TX

Zip Code
75901-8525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213778

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JORDAN SR., R W, , ,

Mailing Address 921 FAIRLINE CT

City
CHAPIN

State
SC

Zip Code
29036-6103

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

05 / 20 / 2018

Transaction ID : SA17.1221512

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KAIRIES, STEPHEN, , ,

Mailing Address 6801 W 83RD ST

City
BLOOMINGTON

State
MN

Zip Code
55438-1262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACCESS FINANCIAL SERVICES, INC.

Occupation (for Individual)
CFO/FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213789

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAMM, HERBERT, , ,

Mailing Address 1207 ROCK SPRINGS ROAD

City
DUNCANVILLE

State
TX

Zip Code
75137-2839

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

05 / 05 / 2018

Transaction ID : SA17.1212999

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. KARL, THOMAS, , ,

Mailing Address 211 COMMERCE COURT
104

City
NEWTOWN SQUARE

State
PA

Zip Code
19073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHYSICIANS CHOICE DIALYSIS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

590.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210780

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KARL, THOMAS, , ,

Mailing Address 211 COMMERCE COURT
104

City
NEWTOWN SQUARE

State
PA

Zip Code
19073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHYSICIANS CHOICE DIALYSIS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210815

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KARL, THOMAS, , ,

Mailing Address 211 COMMERCE COURT
104

City
NEWTOWN SQUARE

State
PA

Zip Code
19073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHYSICIANS CHOICE DIALYSIS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210971

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KARL, THOMAS, , ,

Mailing Address 211 COMMERCE COURT
104

City
NEWTOWN SQUARE

State
PA

Zip Code
19073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHYSICIANS CHOICE DIALYSIS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212726

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KAUFFMAN, LEXIE, , ,

Mailing Address 5605 CAMDEN

City
MIDLAND

State
TX

Zip Code
79707-5040

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212080

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEAHEY, L W, , ,

Mailing Address 3314 SKYVIEW DR.

City
WYLIE

State
TX

Zip Code
75098-5774

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
05 / 20 / 2018

Transaction ID : SA17.1221711

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. KEINATH, WARREN, C., MR.,

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 ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212240

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 610

(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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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

A. KEINATH, WARREN, C., MR.,

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 ▼

1455.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212302

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEINATH, WARREN, C., MR.,

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 ▼

1455.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	8		

Transaction ID : SA17.1213934

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEINATH, WARREN, C., MR.,

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 ▼

1455.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

Transaction ID : SA17.1222914

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 271 OF 610

(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

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

A. KELLOGG, DEBORAH, , ,

Mailing Address 2625 BLACKSTONE CT

 City
 FORT COLLINS

 State
 CO

 Zip Code
 80525-6104

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 SELF

 Occupation (for Individual)
 MINISTER

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
05	26	2018

Transaction ID : SA17.1223878

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. KELLY, DAVID, , ,

Mailing Address 420 SABAL PALM LANE

 City
 INDIAN RIVER SHORE

 State
 FL

 Zip Code
 32963-3460

 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
05	05	2018

Transaction ID : SA17.1211479

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLY, DAVID, , ,

Mailing Address 420 SABAL PALM LANE

 City
 INDIAN RIVER SHORE

 State
 FL

 Zip Code
 32963-3460

 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
05	05	2018

Transaction ID : SA17.1212064

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 272 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLY, LINDSAY, , ,

Mailing Address 8183 SEDGEFIELD DR.

City
PENSACOLA

State
FL

Zip Code
32507-1413

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
05 / 07 / 2018

Transaction ID : SA17.1214110

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. KELLY, PHILLIP, , ,

Mailing Address 730 GOLF VIEW DRIVE

City
JACKSON

State
AL

Zip Code
36545-3230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GEORGIA PACIFIC

Occupation (for Individual)
TECHNOLOGY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA17.1210066

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. KEMP, JAMES, , ,

Mailing Address 4908 BRADFORD DR.

City
ANNANDALE

State
VA

Zip Code
22003-5509

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
05 / 05 / 2018

Transaction ID : SA17.1213721

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KEMPER, JOANNA, , ,

Mailing Address 1318 STATE ROUTE 251

City
COMPTON

State
IL

Zip Code
61318-9704

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210626

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEMPER, JOANNA, , ,

Mailing Address 1318 STATE ROUTE 251

City
COMPTON

State
IL

Zip Code
61318-9704

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212436

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. KIETZER, KAREN, , ,

Mailing Address 7112 WAVERLAND PATH

City
STEVENSVILLE

State
MI

Zip Code
49127-9752

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 Y
05 / 05 / 2018

Transaction ID : SA17.1210628

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 610

(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. KILBURG, GLORIA-ORO, , ,

Mailing Address 4523 SHERINGTON COURT

City
CYPRESSState
CAZip Code
90630-3504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
05	12	2018

Transaction ID : SA17.1217032

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. KILBURG, GLORIA-ORO, , ,

Mailing Address 4523 SHERINGTON COURT

City
CYPRESSState
CAZip Code
90630-3504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
05	16	2018

Transaction ID : SA17.1218769

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KILBURG, GLORIA-ORO, , ,

Mailing Address 4523 SHERINGTON COURT

City
CYPRESSState
CAZip Code
90630-3504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
05	18	2018

Transaction ID : SA17.1220006

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

85.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KILROY, NELLY, , ,

Mailing Address 13600 MARINA POINTE DR.

City

MARINA DEL REY

State

CA

Zip Code

90292-9247

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
05 / 16 / 2018

Transaction ID : SA17.1218884

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIMBALL, MIKE, , ,

Mailing Address 106 EDGEWATER DRIVE

City

NEW IBERIA

State

LA

Zip Code

70563-1708

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
05 / 20 / 2018

Transaction ID : SA17.1221806

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. KING, C G, , ,

Mailing Address 31 KNIGHT AVE.

City

SEQUIM

State

WA

Zip Code

98382-8102

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
05 / 05 / 2018

Transaction ID : SA17.1212970

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KIRK, ROGER, , ,

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 ▼

1250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213593

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRWAN, RALPH, , ,

Mailing Address 1920 GROVE STREET

City
SONOMA

State
CA

Zip Code
95476-6012

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

05 / 13 / 2018

Transaction ID : SA17.1217094

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. KLANG, BRUNO, , ,

Mailing Address P.O. BOX 39

City
ELKA PARK

State
NY

Zip Code
12427-0039

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

05 / 05 / 2018

Transaction ID : SA17.1211126

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 610

(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. KNIGHT, EDWIN, , ,

Mailing Address 458 WHEAT RD

City
AIKENState
SCZip Code
29801-9173FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05		14		2018

Transaction ID : SA17.1217570

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. KNOTT, ELEANOR, , ,

Mailing Address 17150 SCOTT DR.

City
LOS GATOSState
CAZip Code
95030-4175FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05		05		2018

Transaction ID : SA17.1213674

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. KNUDSON, BRENDA, , ,

Mailing Address 301 OTTERVIEW DR.

City
ALTAVISTAState
VAZip Code
24517-4387FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U S POSTAL SERVICEOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211553

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. KNUDSON, BRENDA, , ,

Mailing Address 301 OTTERVIEW DR.

City
ALTAVISTAState
VAZip Code
24517-4387FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U S POSTAL SERVICEOccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	12	/	2018

Transaction ID : SA17.1216675

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOSS, STEIN, , ,

Mailing Address 3200 E CAMELBACK RD

City
PHOENIXState
AZZip Code
85018-2311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEE & ASSOCIATES ARIZONAOccupation (for Individual)
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : SA17.1214637

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOZACKO, TAMMY, , ,

Mailing Address 2912 CONE MANOR LANE

City
RALEIGHState
NCZip Code
27613-6610FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	05	/	2018

Transaction ID : SA17.1211919

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

225.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KROL, JOHN, , ,

Mailing Address 4851 BONITA BAY BLVD PH101

City
BONITA SPRINGS

State
FL

Zip Code
34134-3618

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221427

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRONE, MARILYN, , ,

Mailing Address 675 W PACES FERRY RD
5

City
ATLANTA

State
GA

Zip Code
30327-2663

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
05 / 05 / 2018

Transaction ID : SA17.1210580

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. KRONSKA, ARITA, , ,

Mailing Address 2068 PILLSBURY RD

City
WESTLAKE VILLAGE

State
CA

Zip Code
91361-3528

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
05 / 05 / 2018

Transaction ID : SA17.1210977

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211502

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211562

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213224

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214175

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215291

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218423

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219088

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUPNIK, LEONID, , ,

Mailing Address 2461 EAST 29TH STREET APT.4B

City
BROOKLYN

State
NY

Zip Code
11235-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUSINESS OWNER

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219217

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUMMER, KEN, , ,

Mailing Address 27281 LAKEWAY CT.

City
BONITA SPRINGS

State
FL

Zip Code
34134-8701

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
05 / 05 / 2018

Transaction ID : SA17.1213265

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. KURTZ, BETTIE, , ,

Mailing Address 7535 JULESBURG WAY

City
POWELL

State
TN

Zip Code
37849-5600

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213483

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. LAFRANCE, DOROTHY, , ,

Mailing Address 8616 PINE RD

City
CINCINNATI

State
OH

Zip Code
45242-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOREAL

Occupation (for Individual)
LINE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213426

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAMARQUE, ANTHONY, , ,

Mailing Address 375 CHEROKEE CIR

City
MADISONVILLE

State
TN

Zip Code
37354-6058

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
05 / 22 / 2018

Transaction ID : SA17.1222809

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 OF 610

(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. LAMBERT, CLAUDE, , ,

Mailing Address 715 BUSH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94108-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HOTEL AND RESTAURANT OWNER /

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212790

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. LAMPANI, CRAIG, , ,

Mailing Address 33 HAYNES CIRCLE

City
CHICOPEE

State
MA

Zip Code
01020-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RANDOLPH PRODUCTS COMPANY

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212756

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANUTO, SALVATORE, , ,

Mailing Address 45 LITTLE HARBOR RD

City
COHASSET

State
MA

Zip Code
02025-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1213812

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LARSEN, JOAN, , ,

Mailing Address 484 S. EUCLID AVENUE
109

City
PASADENA

State
CA

Zip Code
91101-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONGRESS SURGERY CENTER

Occupation (for Individual)
REG. NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211415

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. LARSON, CHRISTOPHER, , ,

Mailing Address 6 PINE LANE

City

BROOKFIELD

State

MA

Zip Code

01506-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EASTCOAST BUILDERS

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218408

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LARSON, CHRISTOPHER, , ,

Mailing Address 6 PINE LANE

City

BROOKFIELD

State

MA

Zip Code

01506-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EASTCOAST BUILDERS

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 19 / 2018

Transaction ID : SA17.1221343

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LARSON, CHRISTOPHER, , ,

Mailing Address 6 PINE LANE

City
BROOKFIELD

State
MA

Zip Code
01506-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EASTCOAST BUILDERS

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221881

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LARSON, CHRISTOPHER, , ,

Mailing Address 6 PINE LANE

City
BROOKFIELD

State
MA

Zip Code
01506-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EASTCOAST BUILDERS

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221882

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LARSON, CHRISTOPHER, , ,

Mailing Address 6 PINE LANE

City
BROOKFIELD

State
MA

Zip Code
01506-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EASTCOAST BUILDERS

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221883

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LARSON, ELIZABETH, , ,

Mailing Address 801 WEST WHISPERING CIRCLE

City
SIOUX FALLS

State
SD

Zip Code
57108-4829

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELIZABETH A. LARSON, INC.

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212471

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWLOR, ANNETTE, , ,

Mailing Address 1637 THISTLEWOOD DRIVE

City
WASHINGTON CROSSIN

State
PA

Zip Code
18977-1535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USA

Occupation (for Individual)
PASSIONATE PATRIOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210808

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAWSON, CURTIS, , ,

Mailing Address 9029 AIRPORT BLVD

City
LOS ANGELES

State
CA

Zip Code
90009-5168

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

05 / 05 / 2018

Transaction ID : SA17.1213500

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAWSON, CURTIS, , ,

Mailing Address 9029 AIRPORT BLVD

City
LOS ANGELES

State
CA

Zip Code
90009-5168

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
05 / 28 / 2018

Transaction ID : SA17.1224148

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWSON, JAMES, , ,

Mailing Address 2301 SPANISH RIVER RD

City
BOCA RATON

State
FL

Zip Code
33432-8515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAWSON GROUP LLC

Occupation (for Individual)
CONSULTANT

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
05 / 05 / 2018

Transaction ID : SA17.1210588

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAYNE, HAROLD, , ,

Mailing Address 603 MONROE AVE
PO 216

City
CAROLINA BEACH

State
NC

Zip Code
28428-4308

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
05 / 05 / 2018

Transaction ID : SA17.1213020

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 610

(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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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

A. LAYNE, HAROLD, , ,

Mailing Address 603 MONROE AVE
PO 216City
CAROLINA BEACHState
NCZip Code
28428-4308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05 / 05 / 2018

Transaction ID : SA17.1213330

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LE, DU, , ,

Mailing Address 22906 ROBERTS RUN LN

City
KATYState
TXZip Code
77494-4472FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA17.1210077

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LE, DU, , ,

Mailing Address 22906 ROBERTS RUN LN

City
KATYState
TXZip Code
77494-4472FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210473

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. LE, DU, , ,

Mailing Address 22906 ROBERTS RUN LN

City
KATYState
TXZip Code
77494-4472FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211685

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEAVITT, DENNIS, , ,

Mailing Address 229 LAS VEGAS BLVD DI

City
LAS VEGASState
NVZip Code
89101-5720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEAVITT LAW FIRMOccupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211961

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEBARON, CECILIA, , ,

Mailing Address 8209 FOOTHILL BLVD
A124City
SUNLANDState
CAZip Code
91040-2840FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
AUTHOR

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
05		05		2018

Transaction ID : SA17.1210939

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

325.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. LEE, ELEANOR, , ,

Mailing Address 1930 W. RIVER BEND CT.

City
MEQUONState
WIZip Code
53092-2925FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	8		

Transaction ID : SA17.1210335

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, ELEANOR, , ,

Mailing Address 1930 W. RIVER BEND CT.

City
MEQUONState
WIZip Code
53092-2925FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211549

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, ELEANOR, , ,

Mailing Address 1930 W. RIVER BEND CT.

City
MEQUONState
WIZip Code
53092-2925FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

Transaction ID : SA17.1215724

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LEGETTE, LEQUITA, , ,

Mailing Address 1279 SUTTON MILL RD NW

City
CAIRO

State
GA

Zip Code
39828-4047

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 ▼

205.00

Date of Receipt

05 / **09** / **2018**

Transaction ID : SA17.1214474

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEGETTE, LEQUITA, , ,

Mailing Address 1279 SUTTON MILL RD NW

City
CAIRO

State
GA

Zip Code
39828-4047

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 ▼

205.00

Date of Receipt

05 / **26** / **2018**

Transaction ID : SA17.1223906

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEISTEN, JUDITH, , ,

Mailing Address 5475 VIA YFONTE

City
YORBA LINDA

State
CA

Zip Code
92886-5015

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

05 / **05** / **2018**

Transaction ID : SA17.1212785

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 OF 610

(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. LEONARDI, MARJORIE L., , ,

Mailing Address 5 GOVERNORS DRIVE

City
HENDERSONVILLEState
NCZip Code
28791-1370FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211105

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEONARDI, MARJORIE L., , ,

Mailing Address 5 GOVERNORS DRIVE

City
HENDERSONVILLEState
NCZip Code
28791-1370FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213578

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEONARDI, MARJORIE L., , ,

Mailing Address 5 GOVERNORS DRIVE

City
HENDERSONVILLEState
NCZip Code
28791-1370FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	1		2	0	1	8		

Transaction ID : SA17.1215275

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LEONARDI, MARJORIE L., , ,

Mailing Address 5 GOVERNORS DRIVE

City
HENDERSONVILLE

State
NC

Zip Code
28791-1370

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 ▼

375.00

Date of Receipt

05 / 15 / 2018

Transaction ID : SA17.1218133

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVAND, PAULA, , ,

Mailing Address 24692 SAND WEDGE LANE

City
VALENCIA

State
CA

Zip Code
91355-2311

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

05 / 09 / 2018

Transaction ID : SA17.1214594

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. LEVAND, PAULA, , ,

Mailing Address 24692 SAND WEDGE LANE

City
VALENCIA

State
CA

Zip Code
91355-2311

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

05 / 15 / 2018

Transaction ID : SA17.1217830

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LEWIS, JOE, , ,

Mailing Address **5640 TRIMBLE PARK ROAD**

City
MOUNT DORA

State
FL

Zip Code
32757-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNT DORA BOATING CENTER

Occupation (for Individual)
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212467

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. LIEVAN, RANDY, , ,

Mailing Address **4637 W. TALMADGE DR.**

City
SAN DIEGO

State
CA

Zip Code
92116-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DRYCLEAN DEPOT FRANCHISES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213264

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LILJEBERG, STACY, , ,

Mailing Address **1526 EASTBROOK DR.**

City
SARASOTA

State
FL

Zip Code
34231-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICHAEL SAUNDERS & CO.

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213392

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LINDSAY, LAURENCE, , ,

Mailing Address 2300 MONTORRA DRIVE

City
MODESTO

State
CA

Zip Code
95355-7821

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 ▼

265.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213829

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDSAY, LAURENCE, , ,

Mailing Address 2300 MONTORRA DRIVE

City
MODESTO

State
CA

Zip Code
95355-7821

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 ▼

265.00

Date of Receipt

05 / 08 / 2018

Transaction ID : SA17.1214285

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. LIPIAN, BARBARA, , ,

Mailing Address 38660 ARBOR CT

City
GRAFTON

State
OH

Zip Code
44044-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INTROTECH/ SELF EMPLOYED

Occupation (for Individual)
VOICE TEACH/ VP AM BUSINESS INT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212519

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. LITTLE, JOAN, , ,

Mailing Address P.O. BOX 112

City
EMPIREState
CAZip Code
95319-0112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

EMPIRE GUEST HOME

Occupation (for Individual)

SELF EMPLOYED CAREHOME OPER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212865

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. LOCKRIDGE, ERNEST, , ,

Mailing Address 143 W. SOUTH ST.

City

WORTHINGTON

State

OH

Zip Code

43085-3504

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213648

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOCKRIDGE, ERNEST, , ,

Mailing Address 143 W. SOUTH ST.

City

WORTHINGTON

State

OH

Zip Code

43085-3504

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
0	5				2	8		2	0	1	8		

Transaction ID : SA17.1224128

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LONG, DAVID, , ,

Mailing Address 2191 MOREING ROAD

City
STOCKTON

State
CA

Zip Code
95204-3863

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

05 / 14 / 2018

Transaction ID : SA17.1217375

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOPARDO, ICHOLAS, , ,

Mailing Address 5615 BALTUSROL CT

City
SANIBEL

State
FL

Zip Code
33957-2217

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

05 / 05 / 2018

Transaction ID : SA17.1213244

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOPEZ, CAROLYN, , ,

Mailing Address 5545 VERBENA ST

City
SAN ANTONIO

State
TX

Zip Code
78240-1742

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

05 / 05 / 2018

Transaction ID : SA17.1210594

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LOPEZ, CAROLYN, , ,

Mailing Address 5545 VERBENA ST

City
SAN ANTONIO

State
TX

Zip Code
78240-1742

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
05 / 05 / 2018

Transaction ID : SA17.1213261

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LORA, NELSON, , ,

Mailing Address 5001 WINDSOR CT.

City
ELON COLLEGE

State
NC

Zip Code
27244-9410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GROVE PARK PEDIATRICS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213191

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOUKS, BRUCE, , ,

Mailing Address 403 WALNUT AVE S

City
OWATONNA

State
MN

Zip Code
55060-2937

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

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA17.1223442

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LOVE, STEVEN, , ,

Mailing Address BOX 260, PLATINUM CT.

City
HEALY

State
AK

Zip Code
99743-0260

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213088

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVE, STEVEN, , ,

Mailing Address BOX 260, PLATINUM CT.

City
HEALY

State
AK

Zip Code
99743-0260

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216493

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOVE, STEVEN, , ,

Mailing Address BOX 260, PLATINUM CT.

City
HEALY

State
AK

Zip Code
99743-0260

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 ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218631

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 610

(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. LOVE, STEVEN, , ,

Mailing Address BOX 260, PLATINUM CT.

City
HEALYState
AKZip Code
99743-0260FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2018

Transaction ID : SA17.1219837

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVELL, BOB, , ,

Mailing Address 45 CYPRESS POINT DR.

City
PINEHURSTState
NCZip Code
28374-7133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	22	/	2018

Transaction ID : SA17.1222650

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. LOZANO, BARBARA, , ,

Mailing Address 1432 BAFFIN BAY DR.

City
PLANOState
TXZip Code
75075-2234FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HEALTH & MINISTRY

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
05	/	21	/	2018

Transaction ID : SA17.1222319

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 302 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LULLO, JUDY, , ,

Mailing Address 15823 RIVER ROADS DR.

City
HOUSTON

State
TX

Zip Code
77079-5041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210982

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. LUNGIN, ALEXANDER, , ,

Mailing Address 2978 DEEP CANYON DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1046

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

05 / 05 / 2018

Transaction ID : SA17.1212851

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. LUPIN, PAMELA, , ,

Mailing Address 347 FOCIS STREET

City

METAIRIE

State

LA

Zip Code

70005-3433

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

05 / 05 / 2018

Transaction ID : SA17.1213804

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. LUPO, JOSEPH, , ,

Mailing Address 937 LAKE SHORE ROAD

City
GROSSE POINTE SHOR

State
MI

Zip Code
48236-1177

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
CHIROPRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210911

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. LYON, DONALD, M., ,

Mailing Address 6844 FARWOOD RD

City
ROCKFORD

State
IL

Zip Code
61102-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAITH CENTER

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209950

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYON, DONALD, M., ,

Mailing Address 6844 FARWOOD RD

City
ROCKFORD

State
IL

Zip Code
61102-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAITH CENTER

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 08 / 2018

Transaction ID : SA17.1214361

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 610

(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. LYON, DONALD, M., ,

Mailing Address 6844 FARWOOD RD

City
ROCKFORDState
ILZip Code
61102-4000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAITH CENTEROccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	1		2	0	1	8		

Transaction ID : SA17.1216211

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYON, DONALD, M., ,

Mailing Address 6844 FARWOOD RD

City
ROCKFORDState
ILZip Code
61102-4000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAITH CENTEROccupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	6		2	0	1	8		

Transaction ID : SA17.1218694

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAGLIO, VIINCENT, , ,

Mailing Address 421 RED HAWK DR.

City
JUPITERState
FLZip Code
33477-4204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1210952

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 305 OF 610

(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. MAGRINI, KATHERINE, , ,

Mailing Address 2424 SO. CNCINNATI AVE.

City
TULSAState
OKZip Code
74114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213510

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALFA, HORACE, , ,

Mailing Address 910 STUART AVE
5H

City

MAMARONECK

State
NYZip Code
10543-4134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212876

Amount of Each Receipt this Period

3.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALFA, HORACE, , ,

Mailing Address 910 STUART AVE
5H

City

MAMARONECK

State
NYZip Code
10543-4134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	9		2	0	1	8		

Transaction ID : SA17.1221432

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

153.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MALPASS, EVELYN, , ,

Mailing Address 21330 N. COBURG ROAD

City
HARRISBURG

State
OR

Zip Code
97446-9747

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

05 / 15 / 2018

Transaction ID : SA17.1218031

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. MALZONE, GENNARO, , ,

Mailing Address 513 WOLF TREE

City
TRUCKEE

State
CA

Zip Code
96161-3901

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

05 / 05 / 2018

Transaction ID : SA17.1210728

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALZONE, GENNARO, , ,

Mailing Address 513 WOLF TREE

City
TRUCKEE

State
CA

Zip Code
96161-3901

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

05 / 05 / 2018

Transaction ID : SA17.1211339

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 610

(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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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

A. MALZONE, GENNARO, , ,

Mailing Address 513 WOLF TREE

City
TRUCKEEState
CAZip Code
96161-3901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212951

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCHRSTER, BEN, , ,

Mailing Address W347N5800 FOXGLOVE

City
OCONOMOWOCState
WIZip Code
53066-6721FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1212295

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. MANDIC, ROBERT, , ,

Mailing Address 16242 TISBURY CR

City
HUNTINGTON BEACHState
CAZip Code
92649-2142FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MANDIC MOTORS INC.Occupation (for Individual)
BUS. OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	11	2018

Transaction ID : SA17.1216452

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MANGANELLI, DEBORAH, , ,

Mailing Address 2341 ORCHARD CREST BLVD

City
MANASQUAN

State
NJ

Zip Code
08736-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212570

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANN, ROBERT, , ,

Mailing Address P.O. BOX #3

City
KIRKWOOD

State
NY

Zip Code
13795-0003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIANCE FOR MANUFACTURING & TECHNOLOG

Occupation (for Individual)
NIST / MEP CONSULTANT

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
05 / 03 / 2018

Transaction ID : SA17.1210321

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARCEAU, JOAN, , ,

Mailing Address 9039 LINGROVE ROAD

City
WEEKI WACHEE

State
FL

Zip Code
34613-5151

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
05 / 05 / 2018

Transaction ID : SA17.1210967

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MARCEAU, JOAN, , ,

Mailing Address 9039 LINGROVE ROAD

City

WEEKI WACHEE

State

FL

Zip Code

34613-5151

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

05 / 05 / 2018

Transaction ID : SA17.1211275

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARFLEET, ANNE, , ,

Mailing Address 21311 ASTORIA

City

MISSION VIEJO

State

CA

Zip Code

92692-4967

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

PSYCHOTHERAPIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 09 / 2018

Transaction ID : SA17.1214624

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. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City

WEST CARROLLTON

State

OH

Zip Code

45449-1573

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 ▼

490.00

Date of Receipt

05 / 08 / 2018

Transaction ID : SA17.1214212

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215367

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215379

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218433

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1220940

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1221994

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARFLAK, LYNDA, , ,

Mailing Address 176 GOLFWOOD DRIVE

City
WEST CARROLLTON

State
OH

Zip Code
45449-1573

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 ▼

490.00

Date of Receipt

05 / **23** / **2018**

Transaction ID : SA17.1222879

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 610

(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. MARFLAK, LYNDIA, , ,

Mailing Address 176 GOLFWOOD DRIVE

 City
 WEST CARROLLTON

 State
 OH

 Zip Code
 45449-1573

 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 ▼

490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2018

Transaction ID : SA17.1224350

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARGULIES, CORINNE, , ,

Mailing Address 303 E 57TH STREET - APT 43B

 City
 NEW YORK

 State
 NY

 Zip Code
 10022-2693

 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 ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2018

Transaction ID : SA17.1221121

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARIONCELLI, TED, , ,

Mailing Address 219 OLEANDER DRIVE

 City
 OCEANSIDE

 State
 CA

 Zip Code
 92057-6124

 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
05	/	05	/	2018

Transaction ID : SA17.1210931

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. MAROOF, JACKIE, , ,

Mailing Address 294 WESTVIEW TERRACE

City
ARLINGTONState
TXZip Code
76013-1625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212601

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTENS, DEAN, , ,

Mailing Address 30158 GREENVIEW PARKWAY

City
WESTLAKEState
OHZip Code
44145-6308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DONALD MARTENS AND SONS AMBULANCE SERVOccupation (for Individual)
PRIVATE AMBULANCE SERVICE

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
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1222320

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTINEZ, NORMA L G, , ,

Mailing Address 26332 ALTAS PALMAS RD

City
HARLINGENState
TXZip Code
78552-6288FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RHISDOccupation (for Individual)
TEACHER/SCHOOL COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211937

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MARTINEZ, NORMA L G, , ,

Mailing Address 26332 ALTAS PALMAS RD

City
HARLINGEN

State
TX

Zip Code
78552-6288

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RHISD

Occupation (for Individual)
TEACHER/SCHOOL COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213602

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, RON, , ,

Mailing Address 1742 PEACOCK LANE

City
FULLERTON

State
CA

Zip Code
92833-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INFORMATION SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213675

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. MARTIN, SHIRLEY, , ,

Mailing Address 1373 FLANAGAN DRIVE

City
CHRISTIANSBURG

State
VA

Zip Code
24073-7175

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 ▼

950.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220102

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 610

(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. MARTIN, WILLIAM, , ,

Mailing Address 116 CLAREMONT

City
OAK RIDGEState
TNZip Code
37830-7161FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209990

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MASILKO, SARA, , ,

Mailing Address 210 CIRCLEHILLS DR.

City
GRAND FORKSState
NDZip Code
58201-7921FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212174

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. MASON, JAMES, , ,

Mailing Address 49 WHITETAIL DRIVE

City
REXFORDState
MTZip Code
59930-9438FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (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
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219010

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211641

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211642

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211643

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214497

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219436

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHEWS, GILBERT, , ,

Mailing Address P.O. BOX 911

City
BURNSVILLE

State
MN

Zip Code
55337-0911

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220364

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MATTER, MOHSEN, , ,

Mailing Address 2001 GOLDEN CT

City
MECHANICSBURG

State
PA

Zip Code
17055-6568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELITE INTERNATIONAL GROUP

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213633

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. MAXWELL, PETER, , ,

Mailing Address 66 TOURAINE RD

City
GROSSE POINTE FARM

State
MI

Zip Code
48236-3320

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

05 / 05 / 2018

Transaction ID : SA17.1213380

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. MC CARTHY, PATRICK, , ,

Mailing Address 168B GREENLEAF AVENUE

City
STATEN ISLAND

State
NY

Zip Code
10310-2640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213448

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MCCARTHY, CAROL, , ,

Mailing Address 40 BATTERY ST
PH07

City
BOSTON

State
MA

Zip Code
02109-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NYL

Occupation (for Individual)
REGISTERED REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2018

Transaction ID : SA17.1223687

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCARREY, DONNA, , ,

Mailing Address 4530 E. 136TH AVE.

City

ANCHORAGE

State

AK

Zip Code

99516-4517

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
05 / 15 / 2018

Transaction ID : SA17.1218143

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. MCGLASSON, DANIEL, , ,

Mailing Address 4508 20TH ST N

City

ARLINGTON

State

VA

Zip Code

22207-2302

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
05 / 05 / 2018

Transaction ID : SA17.1212392

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 610

(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. MCINVALE, GERALD, , ,

Mailing Address 116 WINDRIDGE

City
LAGRANGEState
GAZip Code
30240-9728FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5											2	0

Transaction ID : SA17.1216290

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKEEN, CHESTER, M., ,

Mailing Address 2501 MUSEUM WAY
702City
FORT WORTHState
TXZip Code
76107-3058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5											2	0

Transaction ID : SA17.1211030

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. MCKEEN, CHESTER, M., ,

Mailing Address 2501 MUSEUM WAY
702City
FORT WORTHState
TXZip Code
76107-3058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5											2	0

Transaction ID : SA17.1211052

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 OF 610

(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. MCKEEN, CHESTER, M., ,

Mailing Address 2501 MUSEUM WAY
702City
FORT WORTHState
TXZip Code
76107-3058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211428

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. MCLARTY, DONNA, , ,

Mailing Address 4056 KESWICK DR. SE

City
ATLANTAState
GAZip Code
30339-4426FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	1			2	0	1	8		

Transaction ID : SA17.1221980

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCLEAN, DAVID, , ,

Mailing Address 2578 ENTERPRISE RD #342

City
ORANGE CITYState
FLZip Code
32763-7904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212497

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 OF 610

(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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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

A. MCMULKEN, KEVIN, , ,

Mailing Address 15101 STONEY SPRING ROAD

City
EDMONDState
OKZip Code
73013-1316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
M.D.

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210694

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. MEAD, GARY, , ,

Mailing Address 8302 CR 8302

City
LUBBOCKState
TXZip Code
79407FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212784

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEFFORD, DEAN, , ,

Mailing Address P.O. BOX 672

City
EDWARDSVILLEState
ILZip Code
62025-0672FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211527

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 323 OF 610

(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. MEFFORD, DEAN, , ,

Mailing Address P.O. BOX 672

City
EDWARDSVILLEState
ILZip Code
62025-0672FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	8		

Transaction ID : SA17.1213903

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEFFORD, DEAN, , ,

Mailing Address P.O. BOX 672

City
EDWARDSVILLEState
ILZip Code
62025-0672FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

Transaction ID : SA17.1216246

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEFFORD, DEAN, , ,

Mailing Address P.O. BOX 672

City
EDWARDSVILLEState
ILZip Code
62025-0672FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221455

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

35.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MEFFORD, DEAN, , ,

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 ▼

505.00

Date of Receipt

05 / **30** / **2018**

Transaction ID : SA17.1224353

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. MEIGS, ROBERT, , ,

Mailing Address 49 LINE ROAD

City
MALVERN

State
PA

Zip Code
19355-2877

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 ▼

205.00

Date of Receipt

05 / **13** / **2018**

Transaction ID : SA17.1217105

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELONIO, DONALD, , ,

Mailing Address 126 FAIRWAY DR.

City
NEW CASTLE

State
PA

Zip Code
16105-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CUSTOM ETCH , INC

Occupation (for Individual)
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213656

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MELSBAKAS, CESLOVAS, , ,

Mailing Address 26 HARBOUR ISLE DR. W
106

City
HUTCHINSON ISLAND

State
FL

Zip Code
34949-2778

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

05 / 05 / 2018

Transaction ID : SA17.1212973

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MELSBAKAS, CESLOVAS, , ,

Mailing Address 26 HARBOUR ISLE DR. W
106

City
HUTCHINSON ISLAND

State
FL

Zip Code
34949-2778

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

05 / 05 / 2018

Transaction ID : SA17.1213399

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERTZ, DORIS E., , ,

Mailing Address 15541 QUEENSFERRY

City
FORT MYERS

State
FL

Zip Code
33912-4004

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

05 / 05 / 2018

Transaction ID : SA17.1212163

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MESLIN, MELISSA, , ,

Mailing Address 633 JULIA DR.

City
WILMINGTON

State
NC

Zip Code
28412-7953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
RETAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212314

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MICELI, ANAGIE, , ,

Mailing Address 2139 CENTURY WOODS WAY

City
LOS ANGELES

State
CA

Zip Code
90067-6305

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

05 / 19 / 2018

Transaction ID : SA17.1220913

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. MICHAEL, DAVID, , ,

Mailing Address 3406 MARYWOOD DR.

City
SPRING

State
TX

Zip Code
77388-5176

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

05 / 05 / 2018

Transaction ID : SA17.1212919

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MICHAEL, DAVID, , ,

Mailing Address 3406 MARYWOOD DR.

City
SPRING

State
TX

Zip Code
77388-5176

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 Y
05 / 16 / 2018

Transaction ID : SA17.1218393

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. MICHALSKI, MARC, , ,

Mailing Address 9169 OTTER PASS

City
TAMPA

State
FL

Zip Code
33626-3617

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
05 / 26 / 2018

Transaction ID : SA17.1223885

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. MICHEL, GEORGE, , ,

Mailing Address 11779 CALLETA CT

City
PALM BEACH GARDENS

State
FL

Zip Code
33418-1560

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
05 / 05 / 2018

Transaction ID : SA17.1211088

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 610

(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. MIGUEL, SANDRA, , ,

Mailing Address 643 TRAFALGAR DRIVE

City
HAGERSTOWNState
MDZip Code
21742-1231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211190

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. MILES, GERALD, , ,

Mailing Address RT. 7 BOX 106
P.O. BOX 9297City
SOUTH CHARLESTONState
WVZip Code
25309-9502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212803

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, MICHAEL, , ,

Mailing Address 123 WEST MAIN STRET

City
BARRINGTONState
ILZip Code
60010-4302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
JEWELER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212430

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MILLER, MICHAEL, , ,

Mailing Address 123 WEST MAIN STRET

City
BARRINGTON

State
IL

Zip Code
60010-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
JEWELER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1212929

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINBIOLE, PAUL, , ,

Mailing Address 148 PENNSYLVANIA AVE.

City
BRYN MAWR

State
PA

Zip Code
19010-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
E-BEAM SERVICES, INC.

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **06** / **2018**

Transaction ID : SA17.1214018

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MISKA, ESQ, EDWARD, , ,

Mailing Address 745 THIRD STREET

City
LAKE OSWEGO

State
OR

Zip Code
97034-2349

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 ▼

255.00

Date of Receipt

05 / **14** / **2018**

Transaction ID : SA17.1217649

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MISKA, ESQ, EDWARD, , ,

Mailing Address 745 THIRD STREET

City
LAKE OSWEGO

State
OR

Zip Code
97034-2349

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 ▼

255.00

Date of Receipt

05 / **20** / **2018**

Transaction ID : SA17.1221801

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MISKA, ESQ, EDWARD, , ,

Mailing Address 745 THIRD STREET

City
LAKE OSWEGO

State
OR

Zip Code
97034-2349

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 ▼

255.00

Date of Receipt

05 / **24** / **2018**

Transaction ID : SA17.1223590

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOCK, DANIEL, , ,

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 ▼

1250.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213474

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MOFFETT, DR. TONY, , ,

Mailing Address 2510 MILLER WOODS CT

City
VALRICO

State
FL

Zip Code
33594-3819

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 ▼

450.00

Date of Receipt

05 / 09 / 2018

Transaction ID : SA17.1214447

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOFFETT, DR. TONY, , ,

Mailing Address 2510 MILLER WOODS CT

City
VALRICO

State
FL

Zip Code
33594-3819

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 ▼

450.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215278

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOFFETT, DR. TONY, , ,

Mailing Address 2510 MILLER WOODS CT

City
VALRICO

State
FL

Zip Code
33594-3819

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 ▼

450.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221728

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MOFFETT, DR. TONY, , ,

Mailing Address 2510 MILLER WOODS CT

City
VALRICO

State
FL

Zip Code
33594-3819

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 ▼

450.00

Date of Receipt

05 / 24 / 2018

Transaction ID : SA17.1223437

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOHR, FRANZ, , ,

Mailing Address 145 LYON PL

City
LYNBROOK

State
NY

Zip Code
11563-2422

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

05 / 03 / 2018

Transaction ID : SA17.1210151

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOHR, FRANZ, , ,

Mailing Address 145 LYON PL

City
LYNBROOK

State
NY

Zip Code
11563-2422

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

05 / 05 / 2018

Transaction ID : SA17.1210897

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MOIR, ROBERT, , ,

Mailing Address 12230 SW BREYMAN AVENUE

City
PORTLAND

State
OR

Zip Code
97219-8418

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELK ROCK CAPITAL PARTNERS, LLC

Occupation (for Individual)
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210613

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. MONACO, JOHN, , ,

Mailing Address 214 BEACH 148TH STREET
1

City
ROCKAWAY PARK

State
NY

Zip Code
11694-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MUSIC COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216277

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONSON, CARL, , ,

Mailing Address 2868 FITZPATRICK DRIVE

City
TALLAHASSEE

State
FL

Zip Code
32309-3263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED: STRATEGIC WEALTH MANAGE

Occupation (for Individual)
SELF EMPLOYED: STRATEGIC WEAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210462

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 610

(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. MONTE, JOSEPH, , ,

Mailing Address 33700 GROESBECK HWY

City
FRASERState
MIZip Code
48026-4206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHASE FOUROccupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	08	2018

Transaction ID : SA17.1214402

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. MONTGOMERY, VALERIE, , ,

Mailing Address 1845 FOOTS CREEK RD

City
GOLD HILLState
ORZip Code
97525-5718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
05	01	2018

Transaction ID : SA17.1209509

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. MORALES, RAMIRO, , ,

Mailing Address 10431 LONE STAR PLACE

City
FORT LAUDERDALEState
FLZip Code
33328-1344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1213869

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 OF 610

(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. MORELL, OMAR, , ,

Mailing Address 14459 S W 23 TERRAJE

City
MIAMIState
FLZip Code
33175-6322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ACUPUNTURIST

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213657

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. MORRIS, WILLIAM, , ,

Mailing Address 1630 HAMILTON LANE

City
TUSCALOOSAState
ALZip Code
35404-4811FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210929

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, WILLIAM, , ,

Mailing Address 1630 HAMILTON LANE

City
TUSCALOOSAState
ALZip Code
35404-4811FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	8			2	0	1	8		

Transaction ID : SA17.1214182

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MOUNCE, DANIEL, , ,

Mailing Address 3012 DELANO

NE

City
ALBUQUERQUE

State
NM

Zip Code
87106-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

Transaction ID : SA17.1224707

Amount of Each Receipt this Period

1200.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOYER, VIRGINIA, , ,

Mailing Address 13006 DALEY STREET

City
SILVER SPRING

State
MD

Zip Code
20906-5104

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2018

Transaction ID : SA17.1217138

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUELLER, BARBARA, , ,

Mailing Address 5401 N BARLEY CT

City
MUNCIE

State
IN

Zip Code
47304-5926

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210876

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MUELLER, BARBARA, , ,

Mailing Address 5401 N BARLEY CT

City
MUNCIE

State
IN

Zip Code
47304-5926

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213434

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUELLER, BARBARA, , ,

Mailing Address 5401 N BARLEY CT

City
MUNCIE

State
IN

Zip Code
47304-5926

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219129

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUELLER, BARBARA, , ,

Mailing Address 5401 N BARLEY CT

City
MUNCIE

State
IN

Zip Code
47304-5926

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220565

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 610

(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. MUELLER, MARK, , ,

Mailing Address 1300 WEST MAIN ST.

City
LOUISVILLEState
KYZip Code
40203-1436FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARDINAL INDUSTRIAL INSULATIONOccupation (for Individual)
CONSTRUCTION

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
0	5				2	3			2	0	1	8	

Transaction ID : SA17.1222851

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUNAL, JAMIE, , ,

Mailing Address 134 E 12TH

City
SAN JUANState
TXZip Code
78589-2511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	5			2	0	1	8	

Transaction ID : SA17.1210614

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. MUNSON, DAVID, , ,

Mailing Address 5128 BROOKVIEW DRIVE

City
DALLASState
TXZip Code
75220-2206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	5			2	0	1	8	

Transaction ID : SA17.1212494

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. MURPHY, TAMMELA, , ,

Mailing Address 1264 SEMINOLE DR.

City
FORT LAUDERDALE

State
FL

Zip Code
33304-1606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAREGIVERS OF AMERICA, INC

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213598

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUSUMECI, JOSEPH, , ,

Mailing Address 63 QUAIL RUN

City
NORTH ANDOVER

State
MA

Zip Code
01845-5324

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

05 / 18 / 2018

Transaction ID : SA17.1220419

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. MYERS, RON, , ,

Mailing Address 17422 CALGARY AVE

City
YORBA LINDA

State
CA

Zip Code
92886-3807

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
R. M. MYERS CORPORATION

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

239.75

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212380

Amount of Each Receipt this Period

47.95

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

197.95

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 610

(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. NAEGELE, WILLIAM, , ,

Mailing Address 4300 BAKER RD.

City
HOPKINSState
MNZip Code
55343-8600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

RESTAURANTS/REALESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2018

Transaction ID : SA17.1215377

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NATNES, ROBERT, , ,

Mailing Address 30 CHEVERUS RD

City
CAPE ELIZABETHState
MEZip Code
04107-1204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ECI SERVICES OF MAINE, INC

Occupation (for Individual)

CONSULTANT

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
05	/	20	/	2018

Transaction ID : SA17.1221644

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. NAVARRO, JESUS, , ,

Mailing Address 14060 NW 82 AVE.

City
MIAMI LAKESState
FLZip Code
33016-1547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALL AMERICAN INC.

Occupation (for Individual)

PRESIDENT

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
05	/	05	/	2018

Transaction ID : SA17.1213360

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. NEAL,SR, ROBERT, , ,

Mailing Address 109A AVENIDA LAS BRISAS

City
OCEANSIDEState
CAZip Code
92057-6732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	2			2	0	1	8		

Transaction ID : SA17.1210087

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEAL,SR, ROBERT, , ,

Mailing Address 109A AVENIDA LAS BRISAS

City
OCEANSIDEState
CAZip Code
92057-6732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				2	0		2	0	1	8		

Transaction ID : SA17.1221754

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEGRI, JOSEPH, , ,

Mailing Address 33-24 JUNCTION BLVD
1NCity
JACKSON HEIGHTSState
NYZip Code
11372-2039FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	3		2	0	1	8		

Transaction ID : SA17.1217139

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 342 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NEGRI, JOSEPH, , ,

Mailing Address 33-24 JUNCTION BLVD
1N

City
JACKSON HEIGHTS

State
NY

Zip Code
11372-2039

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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

Transaction ID : SA17.1217787

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. NEGRI, JOSEPH, , ,

Mailing Address 33-24 JUNCTION BLVD
1N

City
JACKSON HEIGHTS

State
NY

Zip Code
11372-2039

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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221253

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELL, SHARON, , ,

Mailing Address 401 HWY A1A
131

City
SATELLITE BEACH

State
FL

Zip Code
32937-2307

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
05 / 05 / 2018

Transaction ID : SA17.1212441

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NELSON, LUCINDA, L., MS.,

Mailing Address 21949 LAKE HOOK RD

City
HUTCHINSON

State
MN

Zip Code
55350-5630

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209986

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, LUCINDA, L., MS.,

Mailing Address 21949 LAKE HOOK RD

City
HUTCHINSON

State
MN

Zip Code
55350-5630

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1214660

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, LUCINDA, L., MS.,

Mailing Address 21949 LAKE HOOK RD

City
HUTCHINSON

State
MN

Zip Code
55350-5630

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218920

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 610

(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

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

A. NELSON, LUCINDA, L., MS.,

Mailing Address 21949 LAKE HOOK RD

City
HUTCHINSONState
MNZip Code
55350-5630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
05	26	2018

Transaction ID : SA17.1223887

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, LYLE, , ,Mailing Address 215 N POWER ROAD
469City
MESAState
AZZip Code
85205-8400FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1212899

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, LYLE, , ,Mailing Address 215 N POWER ROAD
469City
MESAState
AZZip Code
85205-8400FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	26	2018

Transaction ID : SA17.1223877

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 345 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NELSON, STEPHEN, , ,

Mailing Address 3320 NEWKIRK DRIVE

City
PLANO

State
TX

Zip Code
75075-6231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORACLE USA

Occupation (for Individual)
SOFTWARE CONSULTANT

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
05 / 05 / 2018

Transaction ID : SA17.1212468

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. NEWBOLE, SEAN, , ,

Mailing Address KAPAA
B

City
LIHUE

State
HI

Zip Code
96766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213706

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWCOMB, JULIE, , ,

Mailing Address 11985 N. 83RD PLACE

City
SCOTTSDALE

State
AZ

Zip Code
85260-5682

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SALES AND MARKETING

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
05 / 05 / 2018

Transaction ID : SA17.1213239

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NEWLON, ADELLE, , ,

Mailing Address 23221 NE 179TH ST.

City
KEARNEY

State
MO

Zip Code
64060-9308

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209887

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWLON, ADELLE, , ,

Mailing Address 23221 NE 179TH ST.

City
KEARNEY

State
MO

Zip Code
64060-9308

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1217072

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWLON, ADELLE, , ,

Mailing Address 23221 NE 179TH ST.

City
KEARNEY

State
MO

Zip Code
64060-9308

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219359

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NEWLON, ADELLE, , ,

Mailing Address 23221 NE 179TH ST.

City
KEARNEY

State
MO

Zip Code
64060-9308

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219360

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NGUYEN, DUONG, , ,

Mailing Address 11015 MISSION PARK CT

City
SANTEE

State
CA

Zip Code
92071-5601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DS FIBERTECH CORP.

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212001

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NGUYEN, DUONG, , ,

Mailing Address 11015 MISSION PARK CT

City
SANTEE

State
CA

Zip Code
92071-5601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DS FIBERTECH CORP.

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213815

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NIMMER, SANDRA, , ,

Mailing Address 6717 NE 181ST ST
SUITE 201

City
KENMORE

State
WA

Zip Code
98028-4837

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213311

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NITSCH, GLENN, , ,

Mailing Address 17414 SPICEWOOD SPRINGS LANE

City
SPRING

State
TX

Zip Code
77379-4281

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NITSCH & SON UTILITY CO., INC.

Occupation (for Individual)
WATER UTILITIES

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
05 / 14 / 2018

Transaction ID : SA17.1217370

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIX, SHARON, , ,

Mailing Address 8371 SANTA MARGARITA LN

City
LA PALMA

State
CA

Zip Code
90623-2220

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
05 / 23 / 2018

Transaction ID : SA17.1223261

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOBLE, CHARLES, , ,

Mailing Address 4015 OAK HARBOUR CIRCLE

City
GAINESVILLE

State
GA

Zip Code
30506-3061

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
05 / 05 / 2018

Transaction ID : SA17.1213188

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. NOLASCO, THOMAS, , ,

Mailing Address 18475 LE CHATEAU

City
BROOKFIELD

State
WI

Zip Code
53045

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213190

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORRIS, CHARLES, , ,

Mailing Address 2340 GLENSTONE AVENUE

City
HACIENDA HEIGHTS

State
CA

Zip Code
91745-4516

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
05 / 05 / 2018

Transaction ID : SA17.1210772

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NORRIS, CHARLES, , ,

Mailing Address 2340 GLENSTONE AVENUE

City
HACIENDA HEIGHTS

State
CA

Zip Code
91745-4516

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
05 / 05 / 2018

Transaction ID : SA17.1211851

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NOTTINGHAM, GEORGE, , ,

Mailing Address 3595 AIKEN COURT

City
WELLINGTON

State
FL

Zip Code
33414-7318

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GROUNDWORKS OF PALM BEACH COUNTY INC

Occupation (for Individual)
NURSERYMAN/FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210441

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NOVAK, MARGARET, , ,

Mailing Address 2998 TEAL LANE

City
CLEARWATER

State
FL

Zip Code
33762-3065

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216118

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1060.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. NOVAK, MARGARET, , ,

Mailing Address 2998 TEAL LANE

City
CLEARWATER

State
FL

Zip Code
33762-3065

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222368

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. NUNEZ, LOGAN, , ,

Mailing Address 8308 CALERA DR.

City
AUSTIN

State
TX

Zip Code
78735-1567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLATINUM PIPE RENTALS

Occupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214601

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NUNEZ, LOGAN, , ,

Mailing Address 8308 CALERA DR.

City
AUSTIN

State
TX

Zip Code
78735-1567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLATINUM PIPE RENTALS

Occupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2018

Transaction ID : SA17.1217256

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. O'MEARA, ANDREW, , ,

Mailing Address 259 FAIRWAY LANE

City
PAWLEYS ISLAND

State
SC

Zip Code
29585-5611

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

05 / 05 / 2018

Transaction ID : SA17.1212389

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. O'NEILL, ELAINE, , ,

Mailing Address 876 NANTUCKET CT

City
SUNNYVALE

State
CA

Zip Code
94087-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EL CAMINO HOSPITAL

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209255

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. O'NEILL, ELAINE, , ,

Mailing Address 876 NANTUCKET CT

City
SUNNYVALE

State
CA

Zip Code
94087-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EL CAMINO HOSPITAL

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210985

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 353 OF 610

(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. OAKLEY, GRETCHEN, , ,Mailing Address 7225 PELICAN BAY BLVD
603City
NAPLESState
FLZip Code
34108-5515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2018

Transaction ID : SA17.1214448

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CONTRIBUTION
NON CONTRIBUTION ACCOUNT; REFUNDED \$75.00
ON 05/09/2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OCHS, DAVID, , ,

Mailing Address 104 E WATER

City
PONTIACState
ILZip Code
61764-1908FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1211392

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. OCHS, DAVID, , ,

Mailing Address 104 E WATER

City
PONTIACState
ILZip Code
61764-1908FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1212108

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ODELL, ROBERT, , ,

Mailing Address 9632 GRAND ISLE LN

City
LAS VEGAS

State
NV

Zip Code
89144-0839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA17.1224037

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OJEDA, JOSE, , ,

Mailing Address 5243 E. TANGO AVE.

City
ANAHEIM

State
CA

Zip Code
92807-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METERMAN SERVICES, INC.

Occupation (for Individual)
BUSSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1215269

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. OJEDA, JOSE, , ,

Mailing Address 5243 E. TANGO AVE.

City
ANAHEIM

State
CA

Zip Code
92807-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METERMAN SERVICES, INC.

Occupation (for Individual)
BUSSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2018

Transaction ID : SA17.1223717

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. OLSOMMER, DONALD, , ,

Mailing Address 321 SPRING HILL ROAD

City
MOSCOW

State
PA

Zip Code
18444-4130

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

05 / 05 / 2018

Transaction ID : SA17.1213240

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. OLSON, LESTER, , ,

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 ▼

375.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213617

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OMLEY, TIMOTHY, , ,

Mailing Address 2810 E SAND RD

City
PORT CLINTON

State
OH

Zip Code
43452-2745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212903

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 610

(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

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

A. OVERBY, MARK, , ,

Mailing Address 1573 SPRING RUN RD EXT

City
CORAOPOLISState
PAZip Code
15108-9625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN AIRLINESOccupation (for Individual)
PILOT

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
05		05		2018

Transaction ID : SA17.1213372

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. OVERSTREET, PATSY, , ,

Mailing Address 58079 DOW TRAIL

City
HANNIBALState
MOZip Code
63401-7698FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		17		2018

Transaction ID : SA17.1219428

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. OVERSTREET, PATSY, , ,

Mailing Address 58079 DOW TRAIL

City
HANNIBALState
MOZip Code
63401-7698FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		18		2018

Transaction ID : SA17.1220875

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. P;ACE, JOHN, , ,

Mailing Address 1725 SHUEY AVE,
409

City
WALNUT CREEK

State
CA

Zip Code
94596-4361

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 ▼

395.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211635

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. P;ACE, JOHN, , ,

Mailing Address 1725 SHUEY AVE,
409

City
WALNUT CREEK

State
CA

Zip Code
94596-4361

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 ▼

395.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216221

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. P;ACE, JOHN, , ,

Mailing Address 1725 SHUEY AVE,
409

City
WALNUT CREEK

State
CA

Zip Code
94596-4361

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 ▼

395.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220820

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. P;ACE, JOHN, , ,

Mailing Address 1725 SHUEY AVE,
409

City
WALNUT CREEK

State
CA

Zip Code
94596-4361

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 ▼

395.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220821

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PACE, ASHLEY, , ,

Mailing Address 615 BAYSHORE DR.
APT.1001

City
PENSACOLA

State
FL

Zip Code
32507-3571

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

05 / **05** / **2018**

Transaction ID : SA17.1210953

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. PADGETT, DIANNE, BROADAWAY, ,

Mailing Address 11152 WESTHEIMER ROAD
#651

City
HOUSTON

State
TX

Zip Code
77042-3208

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 ▼

575.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1212791

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PADGETT, DIANNE, BROADAWAY, ,

Mailing Address 11152 WESTHEIMER ROAD
#651

City
HOUSTON

State
TX

Zip Code
77042-3208

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 ▼

575.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219429

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. PADGETT, DIANNE, BROADAWAY, ,

Mailing Address 11152 WESTHEIMER ROAD
#651

City
HOUSTON

State
TX

Zip Code
77042-3208

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 ▼

575.00

Date of Receipt

05 / **26** / **2018**

Transaction ID : SA17.1223959

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. PALANDJIAN, SHEILA, , ,

Mailing Address P.O. BOX 422

City
BELMONT

State
MA

Zip Code
02478-0004

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

05 / **05** / **2018**

Transaction ID : SA17.1211136

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 360 OF 610
(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. PANEBIANCO, SHIRLEY, , ,

Mailing Address 8832 7TH AVE

City
BROOKLYNState
NYZip Code
11228-3505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211582

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAPSON, PATRICIA, , ,Mailing Address 500 10TH STREET
304City
ALAMOGORDOState
NMZip Code
88310-6776FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF EMPLOYED INSURANCE AGENT

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210795

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. PARIKH, PARMANAND, , ,

Mailing Address 6015 DIVIDE ROAD

City
NIAGARA FALLSState
NYZip Code
14305-1410FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MT SAINT MARY'S HOSPITALOccupation (for Individual)
PHYSICIAN

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212007

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARIS, SUSAN, , ,

Mailing Address 205 EDWARDTON CT.

City
ROSWELL

State
GA

Zip Code
30076-3685

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
05 / 20 / 2018

Transaction ID : SA17.1221827

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. PARKER, GARY, , ,

Mailing Address 5661 N SUNSET LN

City
BRAZIL

State
IN

Zip Code
47834-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GD

Occupation (for Individual)
MANAGER

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
05 / 05 / 2018

Transaction ID : SA17.1211688

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. PARKER, LINDA, , ,

Mailing Address 3021 E IVY ST

City
MESA

State
AZ

Zip Code
85213-5584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DPR REALTY

Occupation (for Individual)
REALTOR

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
05 / 05 / 2018

Transaction ID : SA17.1212238

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PARTAIN, TIM, , ,

Mailing Address 2420 ROGER WILLIAMS

City
IRVING

State
TX

Zip Code
75061-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW HORIZONS ACADEMY

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1215057

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. PARTAIN, TIM, , ,

Mailing Address 2420 ROGER WILLIAMS

City
IRVING

State
TX

Zip Code
75061-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW HORIZONS ACADEMY

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

Transaction ID : SA17.1223265

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARUBI, PAULIN, , ,

Mailing Address 3794 ETTMAN ST

City
SHRUB OAK

State
NY

Zip Code
10588-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAUL PARUBI

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211857

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PARVER-LAMOTTA, YVONNE, , ,

Mailing Address 1 SORREL RUN

City
MOUNT LAUREL

State
NJ

Zip Code
08054-4818

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INTERIOR DESIGNER

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
05 / 05 / 2018

Transaction ID : SA17.1213110

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. PAUL S., PEARCE, , ,

Mailing Address P.O. BOX 27052

City
GREENVILLE

State
SC

Zip Code
29616-2052

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
05 / 05 / 2018

Transaction ID : SA17.1212376

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. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212098

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220083

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220084

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220085

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220733

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220734

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITY

State
UT

Zip Code
84117-5149

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 ▼

255.00

Date of Receipt

05 / **18** / **2018**

Transaction ID : SA17.1220735

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 610

(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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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

A. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITYState
UTZip Code
84117-5149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220736

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITYState
UTZip Code
84117-5149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220737

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City
SALT LAKE CITYState
UTZip Code
84117-5149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2	5		2	0	1	8		

Transaction ID : SA17.1223791

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PAYNE, SUZANNE, , ,

Mailing Address 4780 SUNDALE DR.

City
CLARKSTON

State
MI

Zip Code
48346-3689

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 ▼

725.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215682

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAYNE, SUZANNE, , ,

Mailing Address 4780 SUNDALE DR.

City
CLARKSTON

State
MI

Zip Code
48346-3689

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 ▼

725.00

Date of Receipt

05 / 12 / 2018

Transaction ID : SA17.1216901

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAYNE, SUZANNE, , ,

Mailing Address 4780 SUNDALE DR.

City
CLARKSTON

State
MI

Zip Code
48346-3689

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 ▼

725.00

Date of Receipt

05 / 28 / 2018

Transaction ID : SA17.1224132

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. PAYNE, SUZANNE, , ,

Mailing Address 4780 SUNDALE DR.

City
CLARKSTONState
MIZip Code
48346-3689FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2018

Transaction ID : SA17.1224598

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. PEDERSEN, PIRKKO, , ,

Mailing Address 3589 S OCEAN BLVD
L602City
PALM BEACHState
FLZip Code
33480-5753FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	02	/	2018

Transaction ID : SA17.1210027

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PELL, CATHY, , ,

Mailing Address 7622 HONEY CREEK ROAD

City
CELINAState
TXZip Code
75009-4934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	14	/	2018

Transaction ID : SA17.1217365

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 369 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PELL, CATHY, , ,

Mailing Address 7622 HONEY CREEK ROAD

City
CELINA

State
TX

Zip Code
75009-4934

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 Y Y
05 / 22 / 2018

Transaction ID : SA17.1222465

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEMBERTON, MATTHEW, , ,

Mailing Address 8 WELLESLEY DRIVE

City
LAFAYETTE

State
CA

Zip Code
94549-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213144

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERSON, RALPH, , ,

Mailing Address 12 MARINERS POINT

City
CROSSVILLE

State
TN

Zip Code
38558-2771

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 Y Y
05 / 05 / 2018

Transaction ID : SA17.1211823

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PETERSON, RALPH, , ,

Mailing Address 12 MARINERS POINT

City
CROSSVILLE

State
TN

Zip Code
38558-2771

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 Y Y
05 / 20 / 2018

Transaction ID : SA17.1221935

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETER, SUSAN, , ,

Mailing Address P.O. BOX 367.

City
CHOCORUA

State
NH

Zip Code
03817-0367

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 Y Y
05 / 23 / 2018

Transaction ID : SA17.1223352

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETER, SUSAN, , ,

Mailing Address P.O. BOX 367.

City
CHOCORUA

State
NH

Zip Code
03817-0367

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 Y Y
05 / 31 / 2018

Transaction ID : SA17.1224639

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PFLAUM, DENNIS, , ,

Mailing Address 1875 MEADOW DR.

City
HINCKLEY

State
OH

Zip Code
44233-9523

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

05 / 20 / 2018

Transaction ID : SA17.1221808

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PFLAUM, DENNIS, , ,

Mailing Address 1875 MEADOW DR.

City
HINCKLEY

State
OH

Zip Code
44233-9523

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

05 / 20 / 2018

Transaction ID : SA17.1221836

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHELPS, CHRISTINE, , ,

Mailing Address 210 RIM CANYON PKWY

City
OROVILLE

State
CA

Zip Code
95966-5702

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 ▼

385.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210331

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 610

(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. PHELPS, CHRISTINE, , ,

Mailing Address 210 RIM CANYON PKWY

City
OROVILLEState
CAZip Code
95966-5702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

Transaction ID : SA17.1214522

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLEY, EDWARD, , ,

Mailing Address P.O. BOX 507

City
MER ROUGEState
LAZip Code
71261-0507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SNELSON COMPANIESOccupation (for Individual)
VICE PRESIDENT OVER PIPELINE C

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
0	5			2	5			2	0	1	8		

Transaction ID : SA17.1223837

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. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICEState
FLZip Code
34293-8806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209384

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **06** / **2018**

Transaction ID : SA17.1213998

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **10** / **2018**

Transaction ID : SA17.1214897

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **10** / **2018**

Transaction ID : SA17.1215232

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **12** / **2018**

Transaction ID : SA17.1217062

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **14** / **2018**

Transaction ID : SA17.1217756

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

05 / **16** / **2018**

Transaction ID : SA17.1218616

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PHILLIPS, JUDY, , ,

Mailing Address 5255 ATHENS WAY

City
VENICE

State
FL

Zip Code
34293-8806

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 ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219362

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PIAZZOLA, MARTIN, , ,

Mailing Address 16 GIFFORD WAY

City
MELVILLE

State
NY

Zip Code
11747-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVALONBAY

Occupation (for Individual)
REAL ESTATE DEVELOPMENT

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
05 / 05 / 2018

Transaction ID : SA17.1210805

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. PICKARD, JAMES, , ,

Mailing Address P.O. BOX 4098

City
LANCASTER

State
PA

Zip Code
17604-4098

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 Y
05 / 05 / 2018

Transaction ID : SA17.1210809

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PIERCE, RON, , ,

Mailing Address 9775 W IOWA DR.

City
LAKEWOOD

State
CO

Zip Code
80232-6313

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 Y Y
05 / 21 / 2018

Transaction ID : SA17.1222208

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PIMENTEL, EMILIO, , ,

Mailing Address 4449 SOUTHERN AVE

City
DALLAS

State
TX

Zip Code
75205-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IL GRANITO

Occupation (for Individual)
ENTREPRENEUR

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
05 / 05 / 2018

Transaction ID : SA17.1212786

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. PINCHEV, MICHELLE, , ,

Mailing Address 1295 OSPREY TRAIL

City
NAPLES

State
FL

Zip Code
34105-2774

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
05 / 18 / 2018

Transaction ID : SA17.1220848

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PINCHEV, MICHELLE, , ,

Mailing Address 1295 OSPREY TRAIL

City
NAPLES

State
FL

Zip Code
34105-2774

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

05 / 23 / 2018

Transaction ID : SA17.1223285

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. PINER, DICK, , ,

Mailing Address 4401 PATTESON DR

City
NEW ORLEANS

State
LA

Zip Code
70131

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 ▼

515.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212678

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PINER, DICK, , ,

Mailing Address 4401 PATTESON DR

City
NEW ORLEANS

State
LA

Zip Code
70131

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 ▼

515.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213832

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

153.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 610

(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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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

A. PISTORINO, MARIA H., , ,

Mailing Address 6535 SW 123RD STREET

City
PINECRESTState
FLZip Code
33156-5554FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1213036

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. PLACKER, ALTON W., , ,

Mailing Address 103 WEST POINT ST.

City
VICTORIAState
TXZip Code
77905-4114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1210627

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. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSAState
OKZip Code
74101-3266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
05	01	2018

Transaction ID : SA17.1209659

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSAState
OKZip Code
74101-3266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211529

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSAState
OKZip Code
74101-3266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

Transaction ID : SA17.1218874

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSAState
OKZip Code
74101-3266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	8		

Transaction ID : SA17.1220347

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSA

State
OK

Zip Code
74101-3266

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 ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220589

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PODPECHAN, FRANK, , ,

Mailing Address P.O. BOX 3266

City
TULSA

State
OK

Zip Code
74101-3266

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 ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220590

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLON, CAT, , ,

Mailing Address 12088 MOUND VIEW PLACE

City
STUDIO CITY

State
CA

Zip Code
91604-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
BUSINESS PERSON

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
05 / 29 / 2018

Transaction ID : SA17.1224239

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. POND, CHRIS, , ,

Mailing Address 2341 HIGHWAY 85N

City
WATFORD CITY

State
ND

Zip Code
58854-9204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPCON PARTNERS

Occupation (for Individual)
PIPELINE INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / **02** / **2018**

Transaction ID : SA17.1210136

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POND, CHRIS, , ,

Mailing Address 2341 HIGHWAY 85N

City
WATFORD CITY

State
ND

Zip Code
58854-9204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPCON PARTNERS

Occupation (for Individual)
PIPELINE INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / **15** / **2018**

Transaction ID : SA17.1218078

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POPEJOY, ANN C, , ,

Mailing Address 1651 DAYTON ST

City
WICHITA FALLS

State
TX

Zip Code
76301-6212

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

05 / **20** / **2018**

Transaction ID : SA17.1221545

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 610

(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. PORTER, JOHN, , ,

Mailing Address P.O. BOX 696

City
GARBERVILLEState
CAZip Code
95542-0696FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HOTELIER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213254

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. PORTWINE, KENNETH, , ,

Mailing Address 34 E. JACKSON RD.

City
SAINT LOUISState
MOZip Code
63119-3818FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210719

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORTWINE, KENNETH, , ,

Mailing Address 34 E. JACKSON RD.

City
SAINT LOUISState
MOZip Code
63119-3818FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212682

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PORTWINE, KENNETH, , ,

Mailing Address 34 E. JACKSON RD.

City
SAINT LOUIS

State
MO

Zip Code
63119-3818

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 / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1219950

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POWELL, CHRISTY, , ,

Mailing Address TEN EDGEWATER DRIVE
8A

City
MIAMI

State
FL

Zip Code
33133-6961

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
05 / 01 / 2018

Transaction ID : SA17.1209661

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POWELL, GLENN, , ,

Mailing Address 1816 BINDEL ST.

City
CARLSBAD

State
NM

Zip Code
88220-6503

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 / D D / Y Y Y Y Y Y
05 / 06 / 2018

Transaction ID : SA17.1214010

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. POWELL, GLENN, , ,

Mailing Address 1816 BINDEL ST.

City
CARLSBAD

State
NM

Zip Code
88220-6503

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 / D D / Y Y Y Y Y Y
05 / 30 / 2018

Transaction ID : SA17.1224384

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRATT, JOHN, T., ,

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212974

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRATT, JOHN, T., ,

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA17.1219113

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PRICE, KEN, , ,

Mailing Address 145 CAMDEN COURT

City
ZIONSVILLE

State
IN

Zip Code
46077-1001

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

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212110

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRICE, LARRY, , ,

Mailing Address 5536 SUNRISE TERRACE

City
MARCY

State
NY

Zip Code
13403-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MID-STATE COMMUNICATIONS

Occupation (for Individual)
TECHNICIAN

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
05 / 05 / 2018

Transaction ID : SA17.1211056

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRICE, LARRY, , ,

Mailing Address 5536 SUNRISE TERRACE

City
MARCY

State
NY

Zip Code
13403-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MID-STATE COMMUNICATIONS

Occupation (for Individual)
TECHNICIAN

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
05 / 05 / 2018

Transaction ID : SA17.1211979

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PROCTOR, DANIEL, , ,

Mailing Address 5401 VERNER DR.

City
LA PALMA

State
CA

Zip Code
90623-2043

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

05 / 31 / 2018

Transaction ID : SA17.1224643

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PUELZL, ADELAIDE, , ,

Mailing Address 21FOXURN ST.

City
NEW CITY

State
NY

Zip Code
10956-1440

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

05 / 14 / 2018

Transaction ID : SA17.1217661

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PUGMIRE, RONALD, , ,

Mailing Address 7923 WILLOWCREST ROAD

City
SALT LAKE CITY

State
UT

Zip Code
84121-5726

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 ▼

205.00

Date of Receipt

05 / 13 / 2018

Transaction ID : SA17.1217134

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. PYLES, ROBERT, , ,

Mailing Address 367 WORCESTER STREET

City
WELLESLEY HILLS

State
MA

Zip Code
02481-5346

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

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
05 / 05 / 2018

Transaction ID : SA17.1213876

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. RAHN, NOEL, , ,

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 ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212205

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAIHL, RICHARD, , ,

Mailing Address 1291 ALBION LANE

City
SUNNYVALE

State
CA

Zip Code
94087-3828

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

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211249

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. RAIHL, RICHARD, , ,

Mailing Address 1291 ALBION LANE

City
SUNNYVALE

State
CA

Zip Code
94087-3828

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

05 / **06** / **2018**

Transaction ID : SA17.1213887

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAIHL, RICHARD, , ,

Mailing Address 1291 ALBION LANE

City
SUNNYVALE

State
CA

Zip Code
94087-3828

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

05 / **12** / **2018**

Transaction ID : SA17.1216580

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City
DALLAS

State
TX

Zip Code
75219-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

05 / **06** / **2018**

Transaction ID : SA17.1214016

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City
DALLAS

State
TX

Zip Code
75219-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

05 / 06 / 2018

Transaction ID : SA17.1214017

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City
DALLAS

State
TX

Zip Code
75219-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1216453

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City
DALLAS

State
TX

Zip Code
75219-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218970

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 390 OF 610
(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. REBOUL, SVETLANA, , ,

Mailing Address 155 WEST OAK KNOLL DRIVE

City
SAN ANSELMOState
CAZip Code
94960-1175FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	22	/	2018

Transaction ID : SA17.1222651

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. REDDING, DAVID, , ,

Mailing Address 6931 WYNDHAM HILL

City
VICTORState
NYZip Code
14564-9276FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	08	/	2018

Transaction ID : SA17.1214410

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. REDDING, ED, , ,

Mailing Address 2318 ARBOR CT

City
MARIETTAState
GAZip Code
30066-6413FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1211986

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REED, DAVID, , ,

Mailing Address 4479 HARBOUR LIGHTS COURT

City
ORLANDO

State
FL

Zip Code
32817-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRACTICAL PRODUCTS GROUP, LLC

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221482

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REED, DAVID, , ,

Mailing Address 4479 HARBOUR LIGHTS COURT

City
ORLANDO

State
FL

Zip Code
32817-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRACTICAL PRODUCTS GROUP, LLC

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018

Transaction ID : SA17.1222447

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REEDAL, RICHARD, , ,

Mailing Address 85221 RIDGETOP DR.

City
EUGENE

State
OR

Zip Code
97405-9535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HPC

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1217837

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 392 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REFFNER, JOHN, , ,

Mailing Address 97 OCEAN DRIVE EAST

City
STAMFORD

State
CT

Zip Code
06902-8116

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN JAY COLLEGE, CUNY

Occupation (for Individual)
PROFESSOR

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
05 / 05 / 2018

Transaction ID : SA17.1212968

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REFFNER, JOHN, , ,

Mailing Address 97 OCEAN DRIVE EAST

City
STAMFORD

State
CT

Zip Code
06902-8116

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN JAY COLLEGE, CUNY

Occupation (for Individual)
PROFESSOR

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
05 / 05 / 2018

Transaction ID : SA17.1213079

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REID, PEGGY, , ,

Mailing Address 1302 SIGMA ST

City
PASADENA

State
TX

Zip Code
77504-3937

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
05 / 05 / 2018

Transaction ID : SA17.1211490

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REINHART, THEA, , ,

Mailing Address 17 AURORA

City
IRVINE

State
CA

Zip Code
92603-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MYSELF

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA17.1210263

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REINHART, THEA, , ,

Mailing Address 17 AURORA

City
IRVINE

State
CA

Zip Code
92603-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MYSELF

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211154

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REINHART, THEA, , ,

Mailing Address 17 AURORA

City
IRVINE

State
CA

Zip Code
92603-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MYSELF

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211404

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 394 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REISS, CLAIRE K., , ,

Mailing Address 9675 LA JOLLA FARMS ROAD

City
LA JOLLA

State
CA

Zip Code
92037-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

05 / 12 / 2018

Transaction ID : SA17.1216864

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REISS, CLAIRE K., , ,

Mailing Address 9675 LA JOLLA FARMS ROAD

City
LA JOLLA

State
CA

Zip Code
92037-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA17.1223256

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REISS, DOUG, , ,

Mailing Address 3229 WEST AMES LAKE DRIVE NE, REDM

City
REDMOND

State
WA

Zip Code
98053-9162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 25 / 2018

Transaction ID : SA17.1223860

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REUTNER, SCOTT, , ,

Mailing Address 1770 SHARPS ACCESS RD

City
ELKO

State
NV

Zip Code
89801-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MODERN CONCRETE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212605

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, CHRISTOPHER, , ,

Mailing Address GULL ST

City
DENVER

State
CO

Zip Code
80260

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215372

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, CHRISTOPHER, , ,

Mailing Address GULL ST

City
DENVER

State
CO

Zip Code
80260

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218392

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 396 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 01 / 2018

Transaction ID : SA17.1209376

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 01 / 2018

Transaction ID : SA17.1209377

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 04 / 2018

Transaction ID : SA17.1210492

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 397 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 07 / 2018

Transaction ID : SA17.1214073

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 21 / 2018

Transaction ID : SA17.1222106

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALE

State
CA

Zip Code
94086-4815

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

05 / 21 / 2018

Transaction ID : SA17.1222107

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 OF 610

(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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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

A. REYNOLDS, DIANA, , ,

Mailing Address 125 NO MARY AVE., SPC 1

City
SUNNYVALEState
CAZip Code
94086-4815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			3	1			2	0	1	8		

Transaction ID : SA17.1224637

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, RICHARD, , ,

Mailing Address 89 BARBARA BLVD
21-NOVCity
FELTONState
DEZip Code
19943-5736FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	1	8		

Transaction ID : SA17.1217155

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, RICHARD, , ,

Mailing Address 89 BARBARA BLVD
21-NOVCity
FELTONState
DEZip Code
19943-5736FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

Transaction ID : SA17.1218440

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 OF 610

(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. REYNOLDS, RICHARD, , ,

Mailing Address 89 BARBARA BLVD
21-NOV

City
FELTON

State
DE

Zip Code
19943-5736

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA17.1223905

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, RICHARD, , ,

Mailing Address 89 BARBARA BLVD
21-NOV

City
FELTON

State
DE

Zip Code
19943-5736

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2018

Transaction ID : SA17.1224145

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RHODES, BEDIE, , ,

Mailing Address 7595 MOON RD.
APT. 107

City
COLUMBUS

State
GA

Zip Code
31909-1739

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211014

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 OF 610

(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. RHODES, BEDIE, , ,

Mailing Address 7595 MOON RD.
APT. 107City
COLUMBUSState
GAZip Code
31909-1739FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2018

Transaction ID : SA17.1216517

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHERT, JOSEPH, , ,

Mailing Address 34180 HURON RIVER DRIVE

City
NEW BOSTONState
MIZip Code
48164-9779FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212182

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHERT, JOSEPH, , ,

Mailing Address 34180 HURON RIVER DRIVE

City
NEW BOSTONState
MIZip Code
48164-9779FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212920

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

155.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 401 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. RISSU, SHIRLEY, , ,

Mailing Address 514 INDIAN RD

City
CEDAR RAPIDSState
IAZip Code
52403-1817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211540

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. RITCHIE, WILLIAM, , ,

Mailing Address 5302 BROOKEWAY DR.

City
BETHESDAState
MDZip Code
20816-1308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212158

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RITTER, WILLIAM, , ,

Mailing Address 490 CHESTNUT DRIVE

City
HUNTINGTONState
WVZip Code
25705-3524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
MUSICIAN, SONGWRITER, PRODUCE

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
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209757

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ROACH, ROBERT, , ,

Mailing Address 5200 BROUGHAM LANE

City
PLANO

State
TX

Zip Code
75023-5641

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
05 / 05 / 2018

Transaction ID : SA17.1213241

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. ROBBINS, BARBARA S., , ,

Mailing Address 462 CROCKER SPERRY DR.

City

SANTA BARBARA

State

CA

Zip Code

93108-2213

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211981

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, GARY, , ,

Mailing Address 6206 APPIAN WAY

City

RIVERSIDE

State

CA

Zip Code

92506-4555

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1215510

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, GARY, , ,

Mailing Address 6206 APPIAN WAY

City
RIVERSIDE

State
CA

Zip Code
92506-4555

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218403

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. ROBSON, EARL, , ,

Mailing Address 213 NORTH BALTIMORE STREET

City
DILLSBURG

State
PA

Zip Code
17019-1215

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
05 / 05 / 2018

Transaction ID : SA17.1212528

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBSON, EARL, , ,

Mailing Address 213 NORTH BALTIMORE STREET

City
DILLSBURG

State
PA

Zip Code
17019-1215

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
05 / 05 / 2018

Transaction ID : SA17.1212684

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 OF 610

(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

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

A. RODAWAY, GENE, , ,

Mailing Address 4175 EAST MEXICO AVENUE
402City
DENVERState
COZip Code
80222-4112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05 / 02 / 2018

Transaction ID : SA17.1210127

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RODAWAY, GENE, , ,

Mailing Address 4175 EAST MEXICO AVENUE
402City
DENVERState
COZip Code
80222-4112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05 / 05 / 2018

Transaction ID : SA17.1213281

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODELL, RICK, , ,

Mailing Address 3250 PLAYERS CLUB PARKWAY

City
MEMPHISState
TNZip Code
38125-8844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CORNERSTONE SYSTEMS.COMOccupation (for Individual)
CHAIRMAN/FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213583

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ROEL, LAWRENCE, , ,

Mailing Address 131 CRAGMOOR DR.

City
ROEBUCK

State
SC

Zip Code
29376-3508

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

05 / 17 / 2018

Transaction ID : SA17.1219002

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROLEN, GARRY, , ,

Mailing Address 1485 AMERST RD

City
KNOXVILLE

State
TN

Zip Code
37909-1275

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMERCIAL LIGHTING

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA17.1221967

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. ROLF, WILLIAM, , ,

Mailing Address 824 62 ND ST

City
DOWNERS GROVE

State
IL

Zip Code
60516-1905

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

05 / 20 / 2018

Transaction ID : SA17.1221712

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 610

(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. ROMERO, DOROTHY, , ,

Mailing Address P.O. BOX 5082

City
SANTA FEState
NMZip Code
87502-5082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAR OIL & GAS CORPOccupation (for Individual)
SELF EMPLOYED

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213366

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. ROSS, CAROL, , ,

Mailing Address 305 ANNUNCIATION

City
LAFAYETTEState
LAZip Code
70508-6044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDGE COMMUNICATIONS, INC.Occupation (for Individual)
ADVERTISING

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213531

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. ROUGH, JOSEPH, , ,

Mailing Address 12504 N. FAIRVIEW RD

City
MEADState
WAZip Code
99021-8306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EAGLE HELICOPTERS, INC.Occupation (for Individual)
OWNER, PILOT/MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212260

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ROY, NATALIE, , ,

Mailing Address 1044 TRUMBULL HIGHWAY

City
LEBANON

State
CT

Zip Code
06249-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TNE, INC.

Occupation (for Individual)
CEO

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
05 / 05 / 2018

Transaction ID : SA17.1212940

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROY, NATALIE, , ,

Mailing Address 1044 TRUMBULL HIGHWAY

City
LEBANON

State
CT

Zip Code
06249-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TNE, INC.

Occupation (for Individual)
CEO

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
05 / 05 / 2018

Transaction ID : SA17.1213716

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUPP, LAWRENCE, , ,

Mailing Address 136 W.STANDISH STREET

City
MONROVIA

State
CA

Zip Code
91016-4754

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SECURITY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210695

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. RUSSOTA, RONIT, , ,

Mailing Address 1335 26TH STREET
4

City
SANTA MONICA

State
CA

Zip Code
90404-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LOGISTICS

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
05 / 01 / 2018

Transaction ID : SA17.1209777

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RYAN, JEFF, , ,

Mailing Address 1601 CARRIAGE RD

City
FORT COLLINS

State
CO

Zip Code
80525-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : SA17.1224060

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SACKS, CATHY, , ,

Mailing Address 3214 DOVE CANYON DR.

City
OXNARD

State
CA

Zip Code
93036-6312

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 Y Y
05 / 10 / 2018

Transaction ID : SA17.1215016

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SACKS, CATHY, , ,

Mailing Address 3214 DOVE CANYON DR.

City
OXNARD

State
CA

Zip Code
93036-6312

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 Y Y
05 / 15 / 2018

Transaction ID : SA17.1218214

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SACKS, CATHY, , ,

Mailing Address 3214 DOVE CANYON DR.

City
OXNARD

State
CA

Zip Code
93036-6312

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 Y Y
05 / 18 / 2018

Transaction ID : SA17.1220605

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SACKS, CATHY, , ,

Mailing Address 3214 DOVE CANYON DR.

City
OXNARD

State
CA

Zip Code
93036-6312

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 Y Y
05 / 18 / 2018

Transaction ID : SA17.1220606

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 410 OF 610
(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. SACKS, CATHY, , ,

Mailing Address 3214 DOVE CANYON DR.

City
OXNARDState
CAZip Code
93036-6312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y Y
05	/	19	/	2018

Transaction ID : SA17.1221397

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAGER, JEANNA, L., MS.,

Mailing Address 200WILLOWOOD DR.

City
HIAWATHAState
IAZip Code
52233-4715FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	01	/	2018

Transaction ID : SA17.1209472

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANBORN, MICHAEL, , ,

Mailing Address 114 WASHINGTON ST

City
HUDSONState
MIZip Code
49247-1256FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUDSON PHAMACYOccupation (for Individual)
PHARMACIST

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
05	/	05	/	2018

Transaction ID : SA17.1213807

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SANDERS, IONE, , ,

Mailing Address 3240 SEMINOLE CIRCLE

City
FAIRFIELD

State
CA

Zip Code
94534-7857

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

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214183

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. SANSOM, JOHN, , ,

Mailing Address 9455 PENSACOLA BOULEVARD
SUITE B

City
PENSACOLA

State
FL

Zip Code
32534-1237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN M. SANSOM, P.A.

Occupation (for Individual)
ACCOUNTANT

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
05 / 05 / 2018

Transaction ID : SA17.1211379

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAPP, ALAN, , ,

Mailing Address 261 SHIPYARD RD.

City
SAVANNAH

State
GA

Zip Code
31406-8804

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1218084

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 610

(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. SAPP, ALAN, , ,

Mailing Address 261 SHIPYARD RD.

City
SAVANNAHState
GAZip Code
31406-8804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	1		2	0	1	8		

Transaction ID : SA17.1221948

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SARVER, PERRY, , ,

Mailing Address 11005 CANVASBACK COURT

City
SPOTSYLVANIAState
VAZip Code
22553-3654FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NAVYOccupation (for Individual)
ANALYST

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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1211252

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. SASAKI, BETTY, , ,

Mailing Address 4655 FLORENCE PLACE

City
EUREKAState
CAZip Code
95503-9730FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1212941

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SASAKI, BETTY, , ,

Mailing Address 4655 FLORENCE PLACE

City
EUREKA

State
CA

Zip Code
95503-9730

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 ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221909

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAUNDERS, ART, , ,

Mailing Address 213 WINTERGREEN WAY

City
NEW HOLLAND

State
PA

Zip Code
17557-9685

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
05 / 05 / 2018

Transaction ID : SA17.1213307

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAUNDERS, ART, , ,

Mailing Address 213 WINTERGREEN WAY

City
NEW HOLLAND

State
PA

Zip Code
17557-9685

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
05 / 28 / 2018

Transaction ID : SA17.1224130

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 414 OF 610

(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. SAVARESE BRASINO, ANNE, , ,

Mailing Address 5026 THEALL ROAD

City
RYEState
NYZip Code
10580-1445FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
05	27	2018

Transaction ID : SA17.1224031

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. SAVASTANO, VINCENT, , ,

Mailing Address 4 MARSALA COURT

City
CORTLANDT MANORState
NYZip Code
10567-5132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212644

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAVASTANO, VINCENT, , ,

Mailing Address 4 MARSALA COURT

City
CORTLANDT MANORState
NYZip Code
10567-5132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M	D D	Y Y Y Y
05	05	2018

Transaction ID : SA17.1212931

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SAVASTANO, VINCENT, , ,

Mailing Address 4 MARSALA COURT

City
CORTLANDT MANOR

State
NY

Zip Code
10567-5132

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 ▼

650.00

Date of Receipt

05 / **24** / **2018**

Transaction ID : SA17.1223418

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAEFER, CHAD, , ,

Mailing Address 3 MESERO PLACE

City
HOT SPRINGS VILLAG

State
AR

Zip Code
71909-6005

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 ▼

325.00

Date of Receipt

05 / **01** / **2018**

Transaction ID : SA17.1209740

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. SCHAEFER, CHAD, , ,

Mailing Address 3 MESERO PLACE

City
HOT SPRINGS VILLAG

State
AR

Zip Code
71909-6005

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 ▼

325.00

Date of Receipt

05 / **19** / **2018**

Transaction ID : SA17.1220899

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SCHAEFER, CHAD, , ,

Mailing Address 3 MESERO PLACE

City
HOT SPRINGS VILLAG

State
AR

Zip Code
71909-6005

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2018

Transaction ID : SA17.1222550

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. SCHAFFNIT, BOBBIE, , ,

Mailing Address P.O. BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380-1385

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209537

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHAFFNIT, BOBBIE, , ,

Mailing Address P.O. BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380-1385

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211662

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SCHAFFNIT, BOBBIE, , ,

Mailing Address P.O. BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380-1385

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 ▼

650.00

Date of Receipt

05 / **14** / **2018**

Transaction ID : SA17.1217340

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAFFNIT, BOBBIE, , ,

Mailing Address P.O. BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380-1385

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 ▼

650.00

Date of Receipt

05 / **25** / **2018**

Transaction ID : SA17.1223859

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. SCHAFFER, LEE, , ,

Mailing Address 1469 RED CLIFF WAY

City
CASTLE ROCK

State
CO

Zip Code
80109-3351

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

05 / **05** / **2018**

Transaction ID : SA17.1213393

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SCHILLING, JAN, , ,

Mailing Address 3705 MELSTONE DR.

City
ARLINGTON

State
TX

Zip Code
76016-2752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
REGISTERED NURSE/BUSINESS OW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211320

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHILLING, JAN, , ,

Mailing Address 3705 MELSTONE DR.

City
ARLINGTON

State
TX

Zip Code
76016-2752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
REGISTERED NURSE/BUSINESS OW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214194

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHILLER, SHAWN, , ,

Mailing Address 44 LAKERIDGE DRIVE

City
SPRING

State
TX

Zip Code
77381-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INDEPENDENT CONTRACTOR

Occupation (for Individual)
QA SPECIALIST

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
05 / 05 / 2018

Transaction ID : SA17.1210640

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 OF 610

(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. SCHLEIER, PAUL, , ,

Mailing Address 5007 SHOAL CREEK ROAD

City
SUFFOLKState
VAZip Code
23435-4203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DR. GAYLE TERWILLIGEROccupation (for Individual)
PROSTHODONTIST

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212362

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. SCHMIEDER, GEORGE, , ,

Mailing Address P.O. BOX 14379

City
JACKSONVILLEState
FLZip Code
32238-1379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PHYSICIAN

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211541

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHNELZER, WILLIAM, , ,

Mailing Address 3822 SARAH ST

City
MCKEESPORTState
PAZip Code
15132-1533FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARAMOUNT CONTRACT SERVICES LLCOccupation (for Individual)
CONSTRUCTION SUPERINTENDENT

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
0	5			1	6			2	0	1	8		

Transaction ID : SA17.1218415

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SCHOFF, ROSEMARY, , ,

Mailing Address 6760 N PLACITA MANZANITA

City
TUCSON

State
AZ

Zip Code
85718-1226

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
05 / 31 / 2018

Transaction ID : SA17.1224863

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHROTH, GUNTHER, , ,

Mailing Address 2225 E QUINCY AVE

City
ORANGE

State
CA

Zip Code
92867-6150

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213566

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHULER, BETH, , ,

Mailing Address 1004 PEBBLE BROOK

City
NASHVILLE

State
TN

Zip Code
37221-2231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PET CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222348

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 OF 610

(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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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

A. SCHULTZ, GUILLERMO, , ,

Mailing Address 929 HICKORY RUN LANE

City
GREAT FALLSState
VAZip Code
22066-1904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IIMCOccupation (for Individual)
CONSULTANT

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210754

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHULTZ, PETER, , ,

Mailing Address 1890 S. HERITAGE DR.

City
GILBERTState
AZZip Code
85295-4854FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ENGINEER, INVEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	1	8		

Transaction ID : SA17.1217214

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCIANNA, PAULA, , ,

Mailing Address 16931 SEMINOLE RIDGE DR.

City
CYPRESSState
TXZip Code
77433-3482FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213092

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

450.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 422 OF 610

(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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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

A. SENN, WILLIAM, , ,

Mailing Address 8892 ASHGROVE HOUSE LN

City
VIENNAState
VAZip Code
22182-5550FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	D D	Y Y Y Y
05	22	2018

Transaction ID : SA17.1222705

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHADDOCK, STEVEN, , ,

Mailing Address 925 SAINT ANDREWS LANE

City
LOUISVILLEState
COZip Code
80027-9587FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1210973

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHADDOCK, STEVEN, , ,

Mailing Address 925 SAINT ANDREWS LANE

City
LOUISVILLEState
COZip Code
80027-9587FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1213640

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 423 OF 610

(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. SHADDOCK, STEVEN, , ,

Mailing Address 925 SAINT ANDREWS LANE

City
LOUISVILLEState
COZip Code
80027-9587FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		16		2018

Transaction ID : SA17.1218389

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHANK, JANICE, , ,

Mailing Address 633 MARILYN,

City
BRAWLEYState
CAZip Code
92227-3012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		05		2018

Transaction ID : SA17.1210773

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. SHELTON, GEORGE, P., ,

Mailing Address 4124 KINGSFERRY DRIVE

City
ARLINGTONState
TXZip Code
76016-3636FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		16		2018

Transaction ID : SA17.1218454

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 424 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SICARI, JOE, , ,

Mailing Address 25439 N 89TH ST

City
SCOTTSDALE

State
AZ

Zip Code
85255-3680

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

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221809

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SICARI, JOSEOH, , ,

Mailing Address 25439 N 89TH ST

City
SCOTTSDALE

State
AZ

Zip Code
85255-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARAGON VISION SCIENCES

Occupation (for Individual)
CEO & OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213618

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIEGEL, BARRY, , ,

Mailing Address 20603 CASTLE BEND DRIVE

City
KATY

State
TX

Zip Code
77450-4910

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 Y
05 / 05 / 2018

Transaction ID : SA17.1212296

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 425 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SIEGEL, BARRY, , ,

Mailing Address 20603 CASTLE BEND DRIVE

City
KATY

State
TX

Zip Code
77450-4910

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213037

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. SIESS, JAMES R, , ,

Mailing Address 236 KIEWITT LN

City
UNION

State
MO

Zip Code
63084-3044

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2018

Transaction ID : SA17.1223947

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIKES, MURNEY, , ,

Mailing Address 8210 JACK RABBIT RD.

City
CHEYENNE

State
WY

Zip Code
82009-1403

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 / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214338

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 426 OF 610

(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. SIKES, MURNEY, , ,

Mailing Address 8210 JACK RABBIT RD.

City
CHEYENNEState
WYZip Code
82009-1403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				2	0		2	0	1	8		

Transaction ID : SA17.1221466

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. SIMONIAN, NORA, , ,

Mailing Address 9915 NEVADA AVE

City
CHATSWORTHState
CAZip Code
91311-3615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1211548

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. SIMONI, WILLIAM, , ,

Mailing Address P.O. BOX 1558

City
WOODBIDGEState
CAZip Code
95258-1558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5				0	5		2	0	1	8		

Transaction ID : SA17.1213616

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SIZER, CAROL, , ,

Mailing Address P.O. BOX 101708

City
CAPE CORAL

State
FL

Zip Code
33910-1708

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210675

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIZER, CAROL, , ,

Mailing Address P.O. BOX 101708

City
CAPE CORAL

State
FL

Zip Code
33910-1708

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210832

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SLOAN, THOMAS, , ,

Mailing Address PSC 9 BOX 5187

City
SPANGDAHLEM

State
AE

Zip Code
09123-0052

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
05 / 05 / 2018

Transaction ID : SA17.1213162

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 OF 610

(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. SMITH, CAROLE, , ,

Mailing Address 78619 HIDDEN PALMS DR.

City
PALM DESERTState
CAZip Code
92211-1416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212406

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. SMITH, CHARLES, , ,

Mailing Address 14202 RESERVE COVE

City
PROSPECTState
KYZip Code
40059-8069FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1210725

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. SMITH, CHRISTY, , ,

Mailing Address 125 SW ALSBURY BLVD

City
BURLESONState
TXZip Code
76028-3301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			1	0			2	0	1	8		

Transaction ID : SA17.1215023

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 OF 610

(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. SMITH, CHRISTY, , ,

Mailing Address 125 SW ALSBURY BLVD

City
BURLESONState
TXZip Code
76028-3301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	28	/	2018

Transaction ID : SA17.1224138

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. SMITH, JOHN, , ,

Mailing Address P.O. BOX 1275, 103 RIVERBEND COUNT

City
SHELBYVILLEState
TNZip Code
37162-1275FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2018

Transaction ID : SA17.1210231

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, LARENCE, , ,

Mailing Address 6201 MILLER RD

City
SWARTZ CREEKState
MIZip Code
48473-1598FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1212520

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 430 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SMITH, PRESTON L, , ,

Mailing Address POB 30490

City
FORT LAUDERDALE

State
FL

Zip Code
33303-0490

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211132

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, PRESTON L, , ,

Mailing Address POB 30490

City
FORT LAUDERDALE

State
FL

Zip Code
33303-0490

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 ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213412

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, RANDY, , ,

Mailing Address 232 D.P. ROAD

City
LOS ALAMOS

State
NM

Zip Code
87544-3233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS ALAMOS HOME IMPROVEMENT

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210431

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 431 OF 610

(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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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

A. SMITH, RANDY, , ,

Mailing Address 232 D.P. ROAD

City
LOS ALAMOSState
NMZip Code
87544-3233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS ALAMOS HOME IMPROVEMENTOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2018

Transaction ID : SA17.1219374

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, RANDY, , ,

Mailing Address 232 D.P. ROAD

City
LOS ALAMOSState
NMZip Code
87544-3233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS ALAMOS HOME IMPROVEMENTOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2018

Transaction ID : SA17.1222349

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, RICHARD, , ,

Mailing Address 1580 MILLCREEK WAY

City
SALT LAKE CITYState
UTZip Code
84106-3230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05		05		2018

Transaction ID : SA17.1212328

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SMITH, TOM, , ,

Mailing Address 6174 MCCANN RD

City
LONGVIEW

State
TX

Zip Code
75605-1062

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
05 / 05 / 2018

Transaction ID : SA17.1211374

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. SNITH, CHARLES, , ,

Mailing Address 1 EAST MILL PL

City
LOUISVILLE

State
KY

Zip Code
40222-5971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARAGON WINDOWS & DOORS

Occupation (for Individual)
VICE PRESIDENT

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
05 / 05 / 2018

Transaction ID : SA17.1212744

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. SOCRETES, KANTHY, , ,

Mailing Address 1449 CREEK SIDE DR.
1054

City
WALNUT CREEK

State
CA

Zip Code
94596-5670

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
05 / 05 / 2018

Transaction ID : SA17.1210714

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 OF 610

(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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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

A. SOLIMANDO, FRANK, , ,

Mailing Address 6 GOLF COURSE ROAD

City
SUCCASUNNAState
NJZip Code
07876-2051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05	/	10	/	2018

Transaction ID : SA17.1214656

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. SONMOR, LOY, , ,

Mailing Address 620 HWY 87 S

City
CENTERState
TXZip Code
75935-5334FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FARMER

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 Y
05	/	22	/	2018

Transaction ID : SA17.1222704

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. SORENSON, JAMES, , ,

Mailing Address 5044 SAN AQUARIO DRIVE

City
SAN DIEGOState
CAZip Code
92109-1508FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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 Y
05	/	05	/	2018

Transaction ID : SA17.1213285

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SORENSON, JOSEPH, , ,

Mailing Address 5741 RIDGE CREEK ROAD

City
SALT LAKE CITY

State
UT

Zip Code
84107-6599

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
OWNER MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212511

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRAGUE, SHARRY, , ,

Mailing Address 421 BEYLOR'S FERRY ROAD

City
RILEYVILLE

State
VA

Zip Code
22650-2119

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 ▼

325.00

Date of Receipt

05 / 15 / 2018

Transaction ID : SA17.1218028

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINGS, DARRYL, , ,

Mailing Address 11805 MEADOWGLEN LN APT 1335

City
HOUSTON

State
TX

Zip Code
77082-2778

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

05 / 07 / 2018

Transaction ID : SA17.1214180

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SPRINGS, DARRYL, , ,

Mailing Address 11805 MEADOWGLEN LN APT 1335

City
HOUSTON

State
TX

Zip Code
77082-2778

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

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1215027

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRINGS, DARRYL, , ,

Mailing Address 11805 MEADOWGLEN LN APT 1335

City
HOUSTON

State
TX

Zip Code
77082-2778

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

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218753

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINGS, DARRYL, , ,

Mailing Address 11805 MEADOWGLEN LN APT 1335

City
HOUSTON

State
TX

Zip Code
77082-2778

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

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220756

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 436 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SPURLING, VICTOR, , ,

Mailing Address P.O. BOX 518

City
MILAN

State
OH

Zip Code
44846-0518

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

05 / 05 / 2018

Transaction ID : SA17.1211496

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPURLING, VICTOR, , ,

Mailing Address P.O. BOX 518

City
MILAN

State
OH

Zip Code
44846-0518

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

05 / 11 / 2018

Transaction ID : SA17.1216435

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ST JOHN, MAYNARD, , ,

Mailing Address 15728 ALDAMA CIRCLE

City
PORT CHARLOTTE

State
FL

Zip Code
33981-4609

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

05 / 08 / 2018

Transaction ID : SA17.1214207

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 437 OF 610
(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. ST JOHN, MAYNARD, , ,

Mailing Address 15728 ALDAMA CIRCLE

City
PORT CHARLOTTEState
FLZip Code
33981-4609FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	20	/	2018

Transaction ID : SA17.1221544

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. STAPLETON, LODIE, , ,

Mailing Address 10 SO BRIARHOLLOW LA UNIT 44

City
HOUSTONState
TXZip Code
77027-2825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	15	/	2018

Transaction ID : SA17.1218032

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. STEARNS, MOLLY, , ,

Mailing Address 37 PERALTA AVE

City
LOS GATOSState
CAZip Code
95030-5832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	/	05	/	2018

Transaction ID : SA17.1212416

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 438 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. STEIDEL, CLAIRE, , ,

Mailing Address 10040 E HAPPY FLY RD
 LOT 229

City
 SCOTTSDALE

State
 AZ

Zip Code
 85255

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

DOG JUDGE

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
 05 / 08 / 2018

Transaction ID : SA17.1214411

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. STENBERG, DAVID, , ,

Mailing Address 25 WINDMILL DTREET

City

PAWTUCKET

State

RI

Zip Code

02860-4658

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

COLDWELL BANKER

Occupation (for Individual)

REAL EDTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2018

Transaction ID : SA17.1213462

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, DAVID, , ,

Mailing Address RR 4 BOX 646

City

MARBLE HILL

State

MO

Zip Code

63764-9418

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

WRITER/SPEAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2018

Transaction ID : SA17.1212300

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 439 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. STEWART, FRANK, , ,

Mailing Address 7598 CARAH DR.

City
SAINT FRANCISVILLE

State
LA

Zip Code
70775-4737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HEALTHCARE ADM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213387

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOKER, RICHARD, , ,

Mailing Address 6899 COLLINS AVE.
N 606

City
MIAMI BEACH

State
FL

Zip Code
33141-7400

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 ▼

5000.00

Date of Receipt

05 / 07 / 2018

Transaction ID : SA17.1214112

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STOLLE, FRED, , ,

Mailing Address 3000 ISLAND BLVD
2802

City
NORTH MIAMI BEACH

State
FL

Zip Code
33160-4923

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

05 / 05 / 2018

Transaction ID : SA17.1210729

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. STOLTENBERG, GERALD, , ,

Mailing Address 7292 N BROOKS AVE

City
FRESNO

State
CA

Zip Code
93711-0479

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
05 / 05 / 2018

Transaction ID : SA17.1212933

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. STORDAHL, NORMA, , ,

Mailing Address 71 MONTAGNE CT

City
LITTLE ROCK

State
AR

Zip Code
72223-5082

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA17.1210338

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STORDAHL, NORMA, , ,

Mailing Address 71 MONTAGNE CT

City
LITTLE ROCK

State
AR

Zip Code
72223-5082

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213040

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. STOTT, ROBERT, , ,

Mailing Address 936 CHURCH ST

City
LAYTON

State
UT

Zip Code
84041-2540

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

05 / 03 / 2018

Transaction ID : SA17.1210139

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. STOW, ELIZABETH, , ,

Mailing Address 709 MONTEREY AVE.

City
CAPITOLA

State
CA

Zip Code
95010-3619

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

05 / 05 / 2018

Transaction ID : SA17.1211162

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROMEI, TOM, , ,

Mailing Address P.O. BOX 69

City
LOS LUNAS

State
NM

Zip Code
87031-0069

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

05 / 05 / 2018

Transaction ID : SA17.1212206

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. STYGAR, EDWARD, , ,

Mailing Address 839 S THREE WILLOW CT

City
PALATINE

State
IL

Zip Code
60067-6653

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABSA INTERNATIONAL

Occupation (for Individual)
MANAGEMENT

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
05 / 05 / 2018

Transaction ID : SA17.1213189

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. SUCHER, KELLY, , ,

Mailing Address 5675 SHAUN ROAD

City

WEST BLOOMFIELD

State

MI

Zip Code

48322-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EQUIFAX, INC. LLC

Occupation (for Individual)
SOLUTIONS DIRECTOR

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
05 / 11 / 2018

Transaction ID : SA17.1215701

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUCHER, KELLY, , ,

Mailing Address 5675 SHAUN ROAD

City

WEST BLOOMFIELD

State

MI

Zip Code

48322-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EQUIFAX, INC. LLC

Occupation (for Individual)
SOLUTIONS DIRECTOR

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
05 / 14 / 2018

Transaction ID : SA17.1217537

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SUCHER, KELLY, , ,

Mailing Address 5675 SHAUN ROAD

City
WEST BLOOMFIELD

State
MI

Zip Code
48322-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EQUIFAX, INC. LLC

Occupation (for Individual)
SOLUTIONS DIRECTOR

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
05 / 27 / 2018

Transaction ID : SA17.1224004

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. SUEZ, DANIEL, , ,

Mailing Address 1002 LOCH LOMO0ND DR.

City
ARLINGTON

State
TX

Zip Code
76012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

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
05 / 14 / 2018

Transaction ID : SA17.1217371

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULLIVAN, JAMES, , ,

Mailing Address 7000 FOX CIRCLE

City
LARKSPUR

State
CO

Zip Code
80118-9106

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211489

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SULLIVAN, JAMES, , ,

Mailing Address 7000 FOX CIRCLE

City
LARKSPUR

State
CO

Zip Code
80118-9106

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA17.1221399

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SULLIVAN, MARK, , ,

Mailing Address PSC 9 BOX 2038

City
PINON HILLS

State
AE

Zip Code
09123-0021

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
05 / 05 / 2018

Transaction ID : SA17.1213440

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. SULLIVAN, SAM, , ,

Mailing Address 4441 86TH AVE SE

City
MERCER ISLAND

State
WA

Zip Code
98040-4145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1210963

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 OF 610

(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. SUMP, SHARRON, , ,

Mailing Address 13113 JERUSALEM RD

City
RANDOLPHState
KSZip Code
66554-9056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5		1	6		2	0	1	8		

Transaction ID : SA17.1218412

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUMP, SHARRON, , ,

Mailing Address 13113 JERUSALEM RD

City
RANDOLPHState
KSZip Code
66554-9056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5		1	8		2	0	1	8		

Transaction ID : SA17.1220415

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SURSI, LUCIE, , ,

Mailing Address 11055 BATELLO DR.

City
VENICEState
FLZip Code
34292-4686FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	8		

Transaction ID : SA17.1218330

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. SURSI, LUCIE, , ,

Mailing Address 11055 BATELLO DR.

City
VENICE

State
FL

Zip Code
34292-4686

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 / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA17.1223663

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. SUTLIFF, GREGORY, , ,

Mailing Address 700 CREEK RD

City
CAMP HILL

State
PA

Zip Code
17011-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUTLIFF CHEVROLET

Occupation (for Individual)
AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA17.1215273

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SZENTPETERY, SZABOLCS, , ,

Mailing Address 3431 LADY MARIAN COURT

City
MIDLOTHIAN

State
VA

Zip Code
23113-1184

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
05 / 05 / 2018

Transaction ID : SA17.1211647

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TATE, STANLEY, , ,

Mailing Address 1175 NE 125TH STREET, SUITE 102

City
NORTH MIAMI

State
FL

Zip Code
33161-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1210932

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TATE, STANLEY, , ,

Mailing Address 1175 NE 125TH STREET, SUITE 102

City
NORTH MIAMI

State
FL

Zip Code
33161-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212250

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. TATUM, JOHN, , ,

Mailing Address 3709 MAPLEWOOD AV

City
DALLAS

State
TX

Zip Code
75205-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220099

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TATUM, JOHN, , ,

Mailing Address 3709 MAPLEWOOD AV

City
DALLAS

State
TX

Zip Code
75205-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220100

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. TAYLOR, PHILIP, , ,

Mailing Address 3200 NANCY JEAN ROAD

City
GREENSBORO

State
NC

Zip Code
27406-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212301

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, PHILIP, , ,

Mailing Address 3200 NANCY JEAN ROAD

City
GREENSBORO

State
NC

Zip Code
27406-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2018

Transaction ID : SA17.1224623

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TAYLOR, WILLIAM D, , ,

Mailing Address 8515 COSTA VERDE BLVD
1156

City
SAN DIEGO

State
CA

Zip Code
92122-1130

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
05 / 19 / 2018

Transaction ID : SA17.1220902

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. TEMPLE, LINNETTE, , ,

Mailing Address 422 S BURLINGAME AVE

City
LOS ANGELES

State
CA

Zip Code
90049-4809

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 Y
05 / 10 / 2018

Transaction ID : SA17.1215068

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEMPLE, LINNETTE, , ,

Mailing Address 422 S BURLINGAME AVE

City
LOS ANGELES

State
CA

Zip Code
90049-4809

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 Y
05 / 14 / 2018

Transaction ID : SA17.1217702

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. TEMPLE, LINNETTE, , ,

Mailing Address 422 S BURLINGAME AVE

City
LOS ANGELESState
CAZip Code
90049-4809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			3	0			2	0	1	8		

Transaction ID : SA17.1224389

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TERRY, BILL, , ,

Mailing Address 6535 BRENTFIELD COURT

City
DALLASState
TXZip Code
75248-2273FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211253

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. TEUFEL, DENNIS, , ,

Mailing Address P.O.BOX 5596

City
SCOTTSDALEState
AZZip Code
85261-5596FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212166

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. THATCHER, CHARLES, H., ,

Mailing Address 20255 LANDMARK LANE

City
COVINGTON

State
LA

Zip Code
70435-7746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GULF COAST THERMAL

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212216

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. THIRY, JULIUS, , ,

Mailing Address P.O. BOX 33703

City
SEATTLE

State
WA

Zip Code
98133-0703

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 ▼

290.00

Date of Receipt

05 / 17 / 2018

Transaction ID : SA17.1219008

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THIRY, JULIUS, , ,

Mailing Address P.O. BOX 33703

City
SEATTLE

State
WA

Zip Code
98133-0703

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 ▼

290.00

Date of Receipt

05 / 19 / 2018

Transaction ID : SA17.1221362

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. THOM, VICTOR, , ,

Mailing Address 916 EDWINA WAY

City
CARDIFF BY THE SEA

State
CA

Zip Code
92007-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW YORK LIFE

Occupation (for Individual)
INSURANCE AGENT & FINANCIAL PL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218414

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. THOMAS, DARREN, , ,

Mailing Address 208 SHADY ELM

City
GEORGETOWN

State
TX

Zip Code
78633-2037

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

05 / 20 / 2018

Transaction ID : SA17.1221503

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. THOMAS, J KARL, , ,

Mailing Address 11203 ELAM DR.
203

City
GLEN MILLS

State
PA

Zip Code
19342-2356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
J KARL THOMAS PARTNERSHIP

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213249

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. THOMPSON, DENNIS, D., ,

Mailing Address 22905 KATHRYN AVE

City
TORRANCE

State
CA

Zip Code
90505-3407

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 ▼

280.00

Date of Receipt

05 / **06** / **2018**

Transaction ID : SA17.1213884

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, DENNIS, D., ,

Mailing Address 22905 KATHRYN AVE

City
TORRANCE

State
CA

Zip Code
90505-3407

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 ▼

280.00

Date of Receipt

05 / **07** / **2018**

Transaction ID : SA17.1214041

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, DENNIS, D., ,

Mailing Address 22905 KATHRYN AVE

City
TORRANCE

State
CA

Zip Code
90505-3407

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 ▼

280.00

Date of Receipt

05 / **20** / **2018**

Transaction ID : SA17.1221565

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. THOMPSON, DENNIS, D., ,

Mailing Address 22905 KATHRYN AVE

City
TORRANCE

State
CA

Zip Code
90505-3407

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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222125

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, JAMES, , ,

Mailing Address 116 FREDERICK STREET

City

SANTA CRUZ

State

CA

Zip Code

95062-3477

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELECT TRADING LTD

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211963

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, RICHARD H., , ,

Mailing Address 115 CAMELLIA ROAD

City

GOOSE CREEK

State

SC

Zip Code

29445-3418

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
05 / 09 / 2018

Transaction ID : SA17.1214616

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 455 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TIGANI JR., JAMES V., , ,

Mailing Address 940 N LAKE WAY

City
PALM BEACH

State
FL

Zip Code
33480-3323

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 ▼

375.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211992

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIGANI JR., JAMES V., , ,

Mailing Address 940 N LAKE WAY

City
PALM BEACH

State
FL

Zip Code
33480-3323

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 ▼

375.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213664

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. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)
PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 01 / 2018

Transaction ID : SA17.1209380

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 02 / 2018

Transaction ID : SA17.1210021

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA17.1210364

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215395

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219923

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1222010

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)

PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1222011

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)
PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / **25** / **2018**

Transaction ID : SA17.1223863

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIMMS, ELLIOT, , ,

Mailing Address 6901 N. OLIVE ST.
APT. #3

City
GLADSTONE

State
MO

Zip Code
64118-7801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAGNA LMV AUTOMOTIVE, LIBERTY, MO

Occupation (for Individual)
PRODUCTION LINE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

05 / **31** / **2018**

Transaction ID : SA17.1224635

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TJADER, MICHAEL, , ,

Mailing Address 17 PONUS AVE
2

City
STAMFORD

State
CT

Zip Code
06902-7413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HEARST CORPORATION

Occupation (for Individual)
PRIVATE CHAUFFEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / **05** / **2018**

Transaction ID : SA17.1213245

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TOOHEY, MARY HOLLY, , ,

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 ▼

1250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212522

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOTH, TERRY, , ,

Mailing Address 125 WINTON RD

City
WEST POINT

State
CA

Zip Code
95255-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CAREGIVER/CONSERVATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213312

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOWNSEND, JOHN, , ,

Mailing Address 8306 RD 3.2NE

City
MOSES LAKE

State
WA

Zip Code
98837

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

05 / 21 / 2018

Transaction ID : SA17.1222422

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOWNSEND, JOHN, , ,

Mailing Address 8306 RD 3.2NE

City
MOSES LAKE

State
WA

Zip Code
98837

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
05 / 26 / 2018

Transaction ID : SA17.1223960

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. TOZZI, JOHN, , ,

Mailing Address 270 PEARL ST
102

City
JACKSON

State
WY

Zip Code
83001-5300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAMBRIDGE INVESTMENTS LLC

Occupation (for Individual)
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA17.1214430

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRAVALIA, MARY ELLEN, , ,

Mailing Address 5093 STARFISH AVE.

City
NAPLES

State
FL

Zip Code
34103-2441

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 ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1212863

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 OF 610

(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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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

A. TREIBER, LARRY, , ,

Mailing Address 1575 HARTSVILLE TRL

City
LADY LAKEState
FLZip Code
32162-2269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212685

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TREVORROW, ELDOM M., , ,

Mailing Address S77W26660 CRESTVIEW DR.

City
WAUKESHAState
WIZip Code
53189-9113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UPSOccupation (for Individual)
SEMI DRIVER

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
0	5			2	8			2	0	1	8		

Transaction ID : SA17.1224198

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTHState
MAZip Code
02360-2619FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211980

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTH

State
MA

Zip Code
02360-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / **09** / **2018**

Transaction ID : SA17.1214429

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTH

State
MA

Zip Code
02360-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219292

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTH

State
MA

Zip Code
02360-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / **17** / **2018**

Transaction ID : SA17.1219293

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTH

State
MA

Zip Code
02360-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / **20** / **2018**

Transaction ID : SA17.1221537

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROIA, PHYLLIS, , ,

Mailing Address 627 LONG POND RD

City
PLYMOUTH

State
MA

Zip Code
02360-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BCBSMA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1222126

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROY, MIKE, , ,

Mailing Address 320 SATURN CIRCLE

City
RENO

State
NV

Zip Code
89521-9313

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

05 / **22** / **2018**

Transaction ID : SA17.1222608

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 OF 610

(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. TUFENKIAN, RALPH, , ,

Mailing Address 1465 SUNSHINE DRIVE

City
GLENDALEState
CAZip Code
91208-2432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212248

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. TUTTLE, LEE, , ,

Mailing Address 4718 HALLMARK DR.
102City
HOUSTONState
TXZip Code
77056-3909FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211094

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUTTLE, LEE, , ,

Mailing Address 4718 HALLMARK DR.
102City
HOUSTONState
TXZip Code
77056-3909FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211104

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. TUTTLE, LEE, , ,

Mailing Address 4718 HALLMARK DR.
102

City
HOUSTON

State
TX

Zip Code
77056-3909

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211138

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TUTTLE, LEE, , ,

Mailing Address 4718 HALLMARK DR.
102

City
HOUSTON

State
TX

Zip Code
77056-3909

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1218332

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUTTLE, LEE, , ,

Mailing Address 4718

City
HOUSTON

State
TX

Zip Code
77056

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
05 / 28 / 2018

Transaction ID : SA17.1224131

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 OF 610

(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. TWOHIG, TIMOTHY, , ,

Mailing Address 976 GOLF VU DR.

City
FOND DU LACState
WIZip Code
54935-6417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
DENTIST

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
05		05		2018

Transaction ID : SA17.1210968

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. TYLER, THOMAS, , ,

Mailing Address 2202 CASEY KEY RD

City
NOKOMISState
FLZip Code
34275-3321FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211689

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TYLER, THOMAS, , ,

Mailing Address 2202 CASEY KEY RD

City
NOKOMISState
FLZip Code
34275-3321FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2018

Transaction ID : SA17.1217028

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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: PAGE 467 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. UHRICH, EDWARD, , ,

Mailing Address 348 BAYWOOD DR.

City
PINEY FLATS

State
TN

Zip Code
37686-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAA

Occupation (for Individual)
AIR TRAFFIC CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214116

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. UHRICH, EDWARD, , ,

Mailing Address 348 BAYWOOD DR.

City
PINEY FLATS

State
TN

Zip Code
37686-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAA

Occupation (for Individual)
AIR TRAFFIC CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2018

Transaction ID : SA17.1217261

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN METER, MARGIE, , ,

Mailing Address 316 MCCORMICK PLACE

City
DEXTER

State
MI

Zip Code
48130-8702

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
05 / 05 / 2018

Transaction ID : SA17.1211960

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. VARGAS, CLARK, , ,

Mailing Address 8808 ARLINGTON EXWY.

City
JACKSONVILLEState
FLZip Code
32211FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C.VARGAS&ASSOC.LTD.Occupation (for Individual)
CIVIL ENGINEER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211820

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VARJABEDIAN, TRACY, , ,

Mailing Address 1607 BRACKEN

City
BLOOMFIELD HILLSState
MIZip Code
48302-2203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SELF EMPLOYED

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1213742

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VARNERIN, DAVID, , ,

Mailing Address 1901 N CLEVELAND AVE
UNIT ECity
CHICAGOState
ILZip Code
60614-8530FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221759

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 469 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. VELTING, TERRI, , ,

Mailing Address 7105 VERDE VISTA DR.

City
ROCKFORD

State
MI

Zip Code
49341-9680

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BIBLE STUDY FELLOWSHIP INTERNATIONAL

Occupation (for Individual)

VOLUNTEER FULL TIME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213722

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. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City
ORLANDO

State
FL

Zip Code
32801-1695

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 ▼

305.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218758

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City
ORLANDO

State
FL

Zip Code
32801-1695

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 ▼

305.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220762

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 470 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City
ORLANDO

State
FL

Zip Code
32801-1695

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 ▼

305.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA17.1220763

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City
ORLANDO

State
FL

Zip Code
32801-1695

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 ▼

305.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA17.1222167

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City
ORLANDO

State
FL

Zip Code
32801-1695

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 ▼

305.00

Date of Receipt

05 / 27 / 2018

Transaction ID : SA17.1224026

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. VERLING, JOHN, , ,

Mailing Address 19 WESTCOURT

City
COLLINSVILLE

State
IL

Zip Code
62234-6506

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

05 / 05 / 2018

Transaction ID : SA17.1210806

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. VERONICA, LAWRENCE, , ,

Mailing Address 214 GLENHURST RD.

City
TONAWANDA

State
NY

Zip Code
14150-8424

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

05 / 05 / 2018

Transaction ID : SA17.1213143

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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORD

State
MI

Zip Code
48328

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 ▼

855.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA17.1214673

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 472 OF 610

(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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORDState
MIZip Code
48328FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		13		2018

Transaction ID : SA17.1217296

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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORDState
MIZip Code
48328FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		13		2018

Transaction ID : SA17.1217297

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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORDState
MIZip Code
48328FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		17		2018

Transaction ID : SA17.1219042

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORD

State
MI

Zip Code
48328

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 ▼

855.00

Date of Receipt

05 / **21** / **2018**

Transaction ID : SA17.1222383

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. VOORHEIS, RONNIE, , ,

Mailing Address 2840 WOODBINE DR

City
WATERFORD

State
MI

Zip Code
48328

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 ▼

855.00

Date of Receipt

05 / **31** / **2018**

Transaction ID : SA17.1224824

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VUYK, ED, , ,

Mailing Address INFORMATION REQUESTED

City
BUFFALO GROVE

State
IL

Zip Code
60089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KELSEY ROADHOUSE RESTAURANT

Occupation (for Individual)
RESTAURANT MGR.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / **20** / **2018**

Transaction ID : SA17.1221513

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WADDELL, JESSE, , ,

Mailing Address 128 EAGLES NEST CIRCLE

City
MADISON

State
MS

Zip Code
39110-6029

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
05 / 20 / 2018

Transaction ID : SA17.1221437

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. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA17.1214365

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA17.1216095

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

05 / 12 / 2018

Transaction ID : SA17.1216860

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

05 / 15 / 2018

Transaction ID : SA17.1218217

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218702

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218875

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220645

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSON

State
AZ

Zip Code
85718-4032

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220826

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 610

(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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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

A. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSONState
AZZip Code
85718-4032FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M	D D	Y Y Y Y
05	18	2018

Transaction ID : SA17.1220827

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, FRANCES ANN, , ,

Mailing Address 5920 N CAMINO PADRE ISIDORO

City
TUCSONState
AZZip Code
85718-4032FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M	D D	Y Y Y Y
05	18	2018

Transaction ID : SA17.1220828

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER, VICTORIAR, , ,

Mailing Address 5320 E CAMELBACK ROAD

City
PHOENIXState
AZZip Code
85018-3034FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
05	05	2018

Transaction ID : SA17.1211881

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WALLACE, DEBRA, , ,

Mailing Address P.O. BOX 196

City
MIDLAND

State
TX

Zip Code
79702-0196

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

05 / 05 / 2018

Transaction ID : SA17.1212971

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. WALLACE, DEBRA, , ,

Mailing Address P.O. BOX 196

City
MIDLAND

State
TX

Zip Code
79702-0196

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

05 / 05 / 2018

Transaction ID : SA17.1213106

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, DEBRA, , ,

Mailing Address P.O. BOX 196

City
MIDLAND

State
TX

Zip Code
79702-0196

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

05 / 07 / 2018

Transaction ID : SA17.1214029

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **04** / **2018**

Transaction ID : SA17.1210573

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **07** / **2018**

Transaction ID : SA17.1214145

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **10** / **2018**

Transaction ID : SA17.1215261

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 480 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **15** / **2018**

Transaction ID : SA17.1218333

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **23** / **2018**

Transaction ID : SA17.1223355

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, PAUL, , ,

Mailing Address 3141 FAIRMOUNT LN.

City
PUEBLO

State
CO

Zip Code
81008-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLORADO STATE UNIVERSITY - PUEBLO

Occupation (for Individual)
MACHINIST / WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / **23** / **2018**

Transaction ID : SA17.1223356

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 481 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WARDZALA, WIESLAW, , ,

Mailing Address 3828 DES PLAINES RIVER RD

City
SCHILLER PARK

State
IL

Zip Code
60176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WILLOW ELECTRICAL SUPPLY CO. INC.

Occupation (for Individual)
SELFEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / **15** / **2018**

Transaction ID : SA17.1217857

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARREN, MARY F, , ,

Mailing Address 210 E JACKSON STREET

City
BELZONI

State
MS

Zip Code
39038-3644

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

05 / **05** / **2018**

Transaction ID : SA17.1213757

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARREN, MARY F, , ,

Mailing Address 210 E JACKSON STREET

City
BELZONI

State
MS

Zip Code
39038-3644

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

05 / **19** / **2018**

Transaction ID : SA17.1220932

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 482 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATKINS, TINA M, , ,

Mailing Address P O BOX 141

City
PICKTON

State
TX

Zip Code
75471-0141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222384

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. WATTS SOQUET, L. ANITA, , ,

Mailing Address 4155 TUDOR CENTRE DRIVE, SUITE 208

City
ANCHORAGE

State
AK

Zip Code
99508-5912

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
05 / 08 / 2018

Transaction ID : SA17.1214390

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. WEBER, EDWARD, V., MR.,

Mailing Address P O BOX 1165

City
PORT EWEN

State
NY

Zip Code
12466-1165

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 ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1220650

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 483 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WEDMAN, ROBERT, , ,

Mailing Address 6674 PENTZ RD SPC 40

City
PARADISE

State
CA

Zip Code
95969-2970

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 ▼

455.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212845

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEDMAN, ROBERT, , ,

Mailing Address 6674 PENTZ RD SPC 40

City
PARADISE

State
CA

Zip Code
95969-2970

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 ▼

455.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213117

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. WEDMAN, ROBERT, , ,

Mailing Address 6674 PENTZ RD SPC 40

City
PARADISE

State
CA

Zip Code
95969-2970

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 ▼

455.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215284

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 484 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WEINMAN, GRETCHEN, , ,

Mailing Address 1265 CLEARVIEW CR.

City
ALLENTOWN

State
PA

Zip Code
18103-6008

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

05 / 05 / 2018

Transaction ID : SA17.1213373

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. WEIS, BRIAN, , ,

Mailing Address 7631 WOODWIND DR. UNIT A

City
HUNTINGTON BEACH

State
CA

Zip Code
92647-7117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L. J. ENGINEERING, INC

Occupation (for Individual)
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA17.1222367

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEISZ, WAYNE, , ,

Mailing Address P.O.BOX 1284

City
LODI

State
CA

Zip Code
95241-1284

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CEN-CAL FIRE SYSTEMS INC.

Occupation (for Individual)
CEN-CAL FIRE SYSTEMS INC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1212390

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; REFUNDED
\$250.00 ON 05/07/2018

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WENGER, PAUL, , ,

Mailing Address 230 BOMBERGER ROAD

City
AKRON

State
PA

Zip Code
17501-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX OF READING

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211161

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. WENGER, PAUL, , ,

Mailing Address 230 BOMBERGER ROAD

City
AKRON

State
PA

Zip Code
17501-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX OF READING

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211486

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WENGER, PAUL, , ,

Mailing Address 230 BOMBERGER ROAD

City
AKRON

State
PA

Zip Code
17501-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX OF READING

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

05 / 14 / 2018

Transaction ID : SA17.1217750

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 486 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WESTCAMP, JESSIE, G., ,

Mailing Address 940 COUNTY RD 303

City
ELK CREEK

State
CA

Zip Code
95939-9701

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 ▼

380.00

Date of Receipt

05 / 12 / 2018

Transaction ID : SA17.1216968

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTCAMP, JESSIE, G., ,

Mailing Address 940 COUNTY RD 303

City
ELK CREEK

State
CA

Zip Code
95939-9701

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 ▼

380.00

Date of Receipt

05 / 20 / 2018

Transaction ID : SA17.1221927

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WESTCAMP, JESSIE, G., ,

Mailing Address 940 COUNTY RD 303

City
ELK CREEK

State
CA

Zip Code
95939-9701

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 ▼

380.00

Date of Receipt

05 / 27 / 2018

Transaction ID : SA17.1223996

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 487 OF 610
(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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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

A. WESTERN JR., WAYNE, , ,

Mailing Address 569 WEST ATHENS

City
CLOVISState
CAZip Code
93611-6737FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMMONDS RANCHOccupation (for Individual)
FARMER

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212509

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTOVER, HELEN, , ,

Mailing Address 594 LINDEN AVE

City
BUFFALOState
NYZip Code
14216-2717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212934

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. WETTERER, BILLY, , ,

Mailing Address 1057 N NEBRASKA HIGHWAY 11

City
WOOD RIVERState
NEZip Code
68883-9732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	3			2	0	1	8		

Transaction ID : SA17.1210155

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 488 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WETTERER, BILLY, , ,

Mailing Address 1057 N NEBRASKA HIGHWAY 11

City
WOOD RIVER

State
NE

Zip Code
68883-9732

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 / D D / Y Y Y Y Y Y
05 / 15 / 2018

Transaction ID : SA17.1218080

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WETTERER, BILLY, , ,

Mailing Address 1057 N NEBRASKA HIGHWAY 11

City
WOOD RIVER

State
NE

Zip Code
68883-9732

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 / D D / Y Y Y Y Y Y
05 / 16 / 2018

Transaction ID : SA17.1218774

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHEELER, JOHN, , ,

Mailing Address 684 NILES ROAD

City
NEW HARTFORD

State
CT

Zip Code
06057-2412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1213172

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 489 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WHISNANT, VIVIAN, , ,

Mailing Address P.O. BOX1068

City
ROY

State
WA

Zip Code
98580-1068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALBERTSONS

Occupation (for Individual)
CASHIER

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
05 / 05 / 2018

Transaction ID : SA17.1212530

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. WHITCOMB, STANLEY, , ,

Mailing Address 5823 BOWEN DANIEL DRIVE
603

City
TAMPA

State
FL

Zip Code
33616-1481

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

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA17.1210094

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. WHITCOMB, STANLEY, , ,

Mailing Address 5823 BOWEN DANIEL DRIVE
603

City
TAMPA

State
FL

Zip Code
33616-1481

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

M M / D D / Y Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA17.1222321

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 490 OF 610

(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. WHITE, BECKY, , ,

Mailing Address 4319 CR. 158

City
ALVINState
TXZip Code
77511-7982FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRI OPERATINGOccupation (for Individual)
PIPE LINE INSPECTOR

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
0	5			2	0			2	0	1	8		

Transaction ID : SA17.1221514

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. WHITE, BILLY, , ,

Mailing Address 21007 LAS LOMAS BLVD

City
SAN ANTONIOState
TXZip Code
78258-2940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212021

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, WALTER R, , ,

Mailing Address 709 CORAPEAKE DR.

City
CHESAPEAKEState
VAZip Code
23322-7916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211866

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITTLESEY, CURTIS, C., ,

Mailing Address 1880 BROOKWOOD AVE., APT. 509
APT 509

City
BURLINGTON

State
NC

Zip Code
27215-3206

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
05 / 17 / 2018

Transaction ID : SA17.1219791

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. WILKINS, JOHN, , ,

Mailing Address 1090 PINELLAS BAYWAY S
C2

City
TIERRA VERDE

State
FL

Zip Code
33715-2188

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221515

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, BARBARA, , ,

Mailing Address 6247 DAW COLLINS RD.

City
CLEVELAND

State
TX

Zip Code
77328-6707

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA17.1209391

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WILLIAMS, BARBARA, , ,

Mailing Address 6247 DAW COLLINS RD.

City
CLEVELAND

State
TX

Zip Code
77328-6707

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 ▼

270.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215717

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. WILLIAMS, BARBARA, , ,

Mailing Address 6247 DAW COLLINS RD.

City
CLEVELAND

State
TX

Zip Code
77328-6707

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 ▼

270.00

Date of Receipt

05 / 16 / 2018

Transaction ID : SA17.1218775

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, BARBARA, , ,

Mailing Address 6247 DAW COLLINS RD.

City
CLEVELAND

State
TX

Zip Code
77328-6707

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 ▼

270.00

Date of Receipt

05 / 17 / 2018

Transaction ID : SA17.1219395

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 OF 610

(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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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

A. WILLIAMS, DEBRA, , ,

Mailing Address 6422 W. HWY 98

City
PANAMA CITY BEACHState
FLZip Code
32407-5409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAY ENVIRONMENTAL INC.Occupation (for Individual)
SELF EMPLOYED

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
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212313

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. WILLIAMS, DUDLEY, , ,

Mailing Address 18 KINGS COURT
8City
CAMILLUSState
NYZip Code
13031-1758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRO REP MKTG., LLCOccupation (for Individual)
MFR. REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	8		

Transaction ID : SA17.1210342

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, DUDLEY, , ,

Mailing Address 18 KINGS COURT
8City
CAMILLUSState
NYZip Code
13031-1758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRO REP MKTG., LLCOccupation (for Individual)
MFR. REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	8		

Transaction ID : SA17.1216538

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 OF 610

(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. WILLIAMS, DUDLEY, , ,

Mailing Address 18 KINGS COURT

8

City
CAMILLUSState
NYZip Code
13031-1758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRO REP MKTG., LLCOccupation (for Individual)
MFR. REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2018

Transaction ID : SA17.1218762

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JIM, , ,

Mailing Address 7987 BEAUMONT CT.

City
NAPLESState
FLZip Code
34109-7172FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLLIER COUNTY SHERIFFOccupation (for Individual)
LAW ENFORCEMENT

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
05	/	05	/	2018

Transaction ID : SA17.1212593

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, JIM, , ,

Mailing Address 7987 BEAUMONT CT.

City
NAPLESState
FLZip Code
34109-7172FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLLIER COUNTY SHERIFFOccupation (for Individual)
LAW ENFORCEMENT

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
05	/	05	/	2018

Transaction ID : SA17.1213358

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WILLIAMS, KIMBERLY, , ,

Mailing Address 333 TERMINO AVE

City
LONG BEACH

State
CA

Zip Code
90814-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF

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
05 / 02 / 2018

Transaction ID : SA17.1209999

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, KIMBERLY, , ,

Mailing Address 333 TERMINO AVE

City
LONG BEACH

State
CA

Zip Code
90814-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SELF

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
05 / 05 / 2018

Transaction ID : SA17.1211528

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, PAM, , ,

Mailing Address 428 BENT TREE TRAIL

City
COLUMBUS

State
MS

Zip Code
39705-1127

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
05 / 05 / 2018

Transaction ID : SA17.1212297

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, RENOVA, , ,

Mailing Address 4505 DARTMOORE LAME

City
COLLEYVILLE

State
TX

Zip Code
76034-4262

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 Y
05 / 05 / 2018

Transaction ID : SA17.1213282

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMSON, SCOTT F, , ,

Mailing Address 5107 CANTERBURY DR.

City
POWELL

State
OH

Zip Code
43065-7798

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 Y
05 / 05 / 2018

Transaction ID : SA17.1211254

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. WILLIAMSON, SCOTT F, , ,

Mailing Address 5107 CANTERBURY DR.

City
POWELL

State
OH

Zip Code
43065-7798

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 Y
05 / 20 / 2018

Transaction ID : SA17.1221677

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 OF 610

(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. WILLIAMS, THEODORE, , ,

Mailing Address 329 MELODY DRIVE

City
JESUPState
GAZip Code
31545-8541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

Transaction ID : SA17.1209366

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, ANTHONY, , ,

Mailing Address 200 SOMERSET DRIVE

City
CENTRE HALLState
PAZip Code
16828-7820FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NITTANY CHRISTIAN SCHOOLOccupation (for Individual)
HEADMASTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	8		

Transaction ID : SA17.1223688

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WIRT, CHARLES R, , ,

Mailing Address 6175 NW 167 ST G35

City
HIALEAHState
FLZip Code
33015-4350FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHEAST INS CTR INCOccupation (for Individual)
SOUTHEAST INS CTR INC

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
0	5			1	6			2	0	1	8		

Transaction ID : SA17.1218892

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 OF 610

(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. WISMER, ANN, , ,

Mailing Address 11 WATERFORD OAKS LM

City
KEMAHState
TXZip Code
77565-2923FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WISMER DISTRIBUTING CO.Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2018

Transaction ID : SA17.1210288

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WITT, EDWARD, , ,

Mailing Address 588 CAMINO DEL RIO NORTH

City
SAN DIEGOState
CAZip Code
92108-3206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WITT LINCOLNOccupation (for Individual)
WITT LINCOLN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1211368

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WITT, EDWARD, , ,

Mailing Address 588 CAMINO DEL RIO NORTH

City
SAN DIEGOState
CAZip Code
92108-3206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WITT LINCOLNOccupation (for Individual)
WITT LINCOLN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2018

Transaction ID : SA17.1212654

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WOJICK, CYNTHIA, , ,

Mailing Address 7367 BROKEN STAFF

City
COLUMBIA

State
MD

Zip Code
21045-5037

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA17.1210000

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOJICK, CYNTHIA, , ,

Mailing Address 7367 BROKEN STAFF

City
COLUMBIA

State
MD

Zip Code
21045-5037

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA17.1211556

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOJICK, CYNTHIA, , ,

Mailing Address 7367 BROKEN STAFF

City
COLUMBIA

State
MD

Zip Code
21045-5037

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2018

Transaction ID : SA17.1219974

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOJICK, CYNTHIA, , ,

Mailing Address 7367 BROKEN STAFF

City
COLUMBIA

State
MD

Zip Code
21045-5037

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221502

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLSKE, KENNETH, , ,

Mailing Address 1422 LARPENTEUR AVE WEST

City
FALCON HEIGHTS

State
MN

Zip Code
55113-6303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAROLE

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
05 / 05 / 2018

Transaction ID : SA17.1212199

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. WOOD, GARY, , ,

Mailing Address 46-227 KOAENA PL

City
KANEOHE

State
HI

Zip Code
96744-4134

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 Y
05 / 21 / 2018

Transaction ID : SA17.1222391

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 610

(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODMAN, DEAN, , ,

Mailing Address 233 MOCKINGBIRD TRAIL

City
PALM BEACH

State
FL

Zip Code
33480-3117

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 Y
05 / 05 / 2018

Transaction ID : SA17.1211257

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODWARD, DEBORAH, , ,

Mailing Address 7470 EVANS ROAD

City
GRAND BAY

State
AL

Zip Code
36541-3732

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
05 / 24 / 2018

Transaction ID : SA17.1223381

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. WORKMAN, DAVID, , ,

Mailing Address 1598 E NORMANDY BLVD

City
DELTONA

State
FL

Zip Code
32725-7569

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

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA17.1214173

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. WORKMAN, DAVID, , ,

Mailing Address 1598 E NORMANDY BLVD

City
DELTONA

State
FL

Zip Code
32725-7569

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

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA17.1221810

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOZNICKI, TRACY, , ,

Mailing Address 34 HILLS STREET

City
MANCHESTER

State
CT

Zip Code
06040-6307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A PHARMACEUTICAL COMPANY

Occupation (for Individual)
R.N. CASE MANAGER

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
05 / 05 / 2018

Transaction ID : SA17.1213277

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. WWST, CAROLE, , ,

Mailing Address 7175 CHARTWELL LANE

City
MEMPHIS

State
TN

Zip Code
38120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SWLF

Occupation (for Individual)
MEDICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA17.1223383

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 503 OF 610
(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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

A. WYNN, PAUL, , ,

Mailing Address P.O. BOX 3930

City
ALBUQUERQUEState
NMZip Code
87190-3930FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACE METALSOccupation (for Individual)
SELF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1212645

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. XIAO, JINYUAN, , ,

Mailing Address 7114 YELLOWSTONE BLVD

City
FOREST HILLSState
NYZip Code
11375-3540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
PHYSICAL THERAPY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	8		

Transaction ID : SA17.1211994

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. XIAO, JINYUAN, , ,

Mailing Address 7114 YELLOWSTONE BLVD

City
FOREST HILLSState
NYZip Code
11375-3540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
PHYSICAL THERAPY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

Transaction ID : SA17.1219096

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

305.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 OF 610
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. YANAKAS, JOYCE, , ,

Mailing Address 80 ADAMS DRIVE

City
CRESSKILL

State
NJ

Zip Code
07626-1728

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
05 / 03 / 2018

Transaction ID : SA17.1210153

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. YOFE, MURRAY, , ,

Mailing Address 161 SUMMIT RIDGE WAY

City
GARDNERVILLE

State
NV

Zip Code
89460-6416

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
05 / 05 / 2018

Transaction ID : SA17.1212073

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. YOUNG, ADAM, , ,

Mailing Address 4115 2ND ST CT NE

City
HICKORY

State
NC

Zip Code
28601-8026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HENDRICK HONDA HICKORY

Occupation (for Individual)
DETAIL MANAGER

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
05 / 05 / 2018

Transaction ID : SA17.1213341

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. YOUNG, DEBBIE, , ,

Mailing Address 1810 122ND AVE SE

City
BELLEVUE

State
WA

Zip Code
98005-4624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UPWARD VISION LLC

Occupation (for Individual)
VICE PRESIDENT/TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 11 / 2018

Transaction ID : SA17.1215451

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, DEBBIE, , ,

Mailing Address 1810 122ND AVE SE

City
BELLEVUE

State
WA

Zip Code
98005-4624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UPWARD VISION LLC

Occupation (for Individual)
VICE PRESIDENT/TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 14 / 2018

Transaction ID : SA17.1217478

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, DEBBIE, , ,

Mailing Address 1810 122ND AVE SE

City
BELLEVUE

State
WA

Zip Code
98005-4624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UPWARD VISION LLC

Occupation (for Individual)
VICE PRESIDENT/TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 27 / 2018

Transaction ID : SA17.1224002

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 506 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ZACHA, ROBIN, , ,

Mailing Address 6528 HEDDING STREET

City
LOS ANGELES

State
CA

Zip Code
90045-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1211497

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. ZACHA, ROBIN, , ,

Mailing Address 6528 HEDDING STREET

City
LOS ANGELES

State
CA

Zip Code
90045-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

05 / 05 / 2018

Transaction ID : SA17.1213848

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. ZACHA, ROBIN, , ,

Mailing Address 6528 HEDDING STREET

City
LOS ANGELES

State
CA

Zip Code
90045-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA17.1222848

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ZARETSKAYA, YELENA, , ,

Mailing Address 427 BRADLEY AVE

City
STATEN ISLAND

State
NY

Zip Code
10314-6945

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

05 / 05 / 2018

Transaction ID : SA17.1213627

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. ZEBROWSKI, SUE, , ,

Mailing Address 5581 NORTHWOOD DR.

City
EVERGREEN

State
CO

Zip Code
80439-5538

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

05 / 05 / 2018

Transaction ID : SA17.1211906

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEBROWSKI, SUE, , ,

Mailing Address 5581 NORTHWOOD DR.

City
EVERGREEN

State
CO

Zip Code
80439-5538

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

05 / 05 / 2018

Transaction ID : SA17.1213402

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGH

State
IN

Zip Code
47630-1793

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

05 / 01 / 2018

Transaction ID : SA17.1209662

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; REFUNDED
\$100.00 ON 05/24/2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGH

State
IN

Zip Code
47630-1793

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

05 / 11 / 2018

Transaction ID : SA17.1215300

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; REFUNDED \$25.00
ON 05/24/2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGH

State
IN

Zip Code
47630-1793

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

05 / 22 / 2018

Transaction ID : SA17.1222648

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; REFUNDED \$25.00
ON 05/24/2018

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 OF 610

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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. ZERVOS, FRED, , ,

Mailing Address 15350 108TH AVE

City
ORLAND PARK

State
IL

Zip Code
60467-4502

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
05 / 05 / 2018

Transaction ID : SA17.1213416

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. ZUBER, PETER, , ,

Mailing Address 1180 ASHMOUNT AVE

City
OAKLAND

State
CA

Zip Code
94610-1207

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 Y
05 / 05 / 2018

Transaction ID : SA17.1210818

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

84164.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 510 OF 610

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

3475.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

135.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

200.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

3810.54

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 PageFOR LINE NUMBER:
(check only one)

PAGE 511 OF 610

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		18		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 512 OF 610

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.I11904**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		25		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.I11904**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.I11904**

Amount of Each Disbursement this Period

40.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

280.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 513 OF 610

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ELAVON, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Mailing Address TWO CONCOURSE PARKWAY
STE 800City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I1190

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

4310.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 514 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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. JEFF DUNCAN FOR CONGRESS

Mailing Address PO BOX 845

City
LAURENSState
SCZip Code
29360Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

DUNCAN, JEFFREY, D, ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C C00460550**Transaction ID : SB23.I119182**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOSH HAWLEY FOR SENATE

Mailing Address 150 LONG ROAD SUITE 50

City
CHESTERFIELDState
MOZip Code
63005Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

HAWLEY, JOSHUA, DAVID, ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2018

FEC Identification Number

C C00652727**Transaction ID : SB23.I119059**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

BLACKBURN, MARSHA, , MRS.,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C C00376939**Transaction ID : SB23.I11906;**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 515 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119063**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LINDA BAZE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119064**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LIDIA BESSMERTNOV

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119066**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5010.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 516 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM SUSAN BURSTEIN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119066**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KIM DEMETRI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119067**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EWAN DOWNS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119066**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 517 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARK EISENBERG

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119069**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARY FISHER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119070**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DONALD HAMMER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11907**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 518 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM REBECCA HANNA

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119072**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JANE HUGHES

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119073**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EILEEN KELLY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11907**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 519 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KENNETH M KOONCE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119075**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROGER LANGRECK

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119076**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DUSTY LANGSTON

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119077**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 520 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM VINCENT LINO

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119078**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN MARSHALL

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119079**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN MCCARTHY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119081**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 521 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DIANA PERKINSON

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119081**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN PIROGOWICZ

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119082**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GRACE PRINCE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11908:**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 522 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ELIZABETH RIEDL

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119084**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT SANTNER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119085**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ELZADA STARKS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119081**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 523 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM BEVERLY SYLVIA

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119087**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM SCOTT TIETJEN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119088**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ELLIOT TIMMS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119088**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 524 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WILLIAM TRUITT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119090**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARJORIE VENDITTI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119091**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ALLEN WIRE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11909;**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 525 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARYELLEN AHNEMAN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119093**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM FLEUR BROWN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119094**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARLETTE CULLEN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119099**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 526 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MAXINE ERICKSON

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119096**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN FITCH

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119097**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARTHA GUTIERREZ

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119098**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 527 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MELVIN JONES

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119099**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GEORGE LOHMANN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119100**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DEBORAH MCGARRAH

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119100**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 528 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CAROLYN MULLER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

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0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119102**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EVELYN NEIRA

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119103**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GEORGE PEABODY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11910**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 529 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM BETTY PERLEY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119105**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ELSA WAGNER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119106**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM SANDRA SHINENSKY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119107**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 530 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JULES GUILLOT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119108**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GREGORY JONES

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119109**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DARRIS BALL

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119111**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 531 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOAN BANKS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

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0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119111**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN BONOMO

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119112**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JAMES BRAINERD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119111**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 532 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM RANDOLPH CHIN QUEE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119114**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EWAN DOWNS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119115**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CAROL FOTI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119111**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 533 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LYNN FRANK

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119117**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN GLORIOD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119118**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LEONIDAS GONZALEZ

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119111**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 534 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT E. GOODSON

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939

Transaction ID : SB23.I119120

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM SHERI GUNDRUM

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939

Transaction ID : SB23.I119121

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM RAYMOND KERKER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939

Transaction ID : SB23.I11912:

Amount of Each Disbursement this Period

5.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 535 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LINDA KIGHT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119123**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARY KOPMEIER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119124**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JAMES KRETSCH

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11912**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 536 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT LEWIS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119126**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GEORGE LOHMANN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119127**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM RICHARD MCMULLEN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119121**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 537 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM IAN MONTGOMERY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119129**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM COLETTE POPE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119130**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM FRANCIS ROTHSCHILD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119131**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 538 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM BRUCE SCHIRMERS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119132**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DARRYL SPRINGS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119133**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WILLIAM TAYLOR

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119133**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 539 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MILTON WOOD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119135**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DWIGHT WOODS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119136**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DANIEL ZUCKER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119137**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 540 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARY SEELEY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119138**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KEN SORLEY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119139**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LEEANN THOMAS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119141**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 541 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WILLIAM GIBSON

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119141**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KATHLEEN ROGERS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119142**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT FEIGENBAUM

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119141**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 542 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GILBERT MATHEWS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119144**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EWAN DOWNS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119145**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARK EISENBERG

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119144**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 543 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KENNETH M KOONCE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119147**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROGER LANGRECK

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119148**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WILLIAM TRUITT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119148**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 544 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARLETTE CULLEN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119150**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOAN BANKS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119151**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EWAN DOWNS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119151**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 545 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CAROL FOTI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119153**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LEONIDAS GONZALEZ

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119154**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARY KOPMEIER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119151**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 546 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DANIEL ZUCKER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119156**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JANE HUGHES

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119157**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MILTON WOOD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119151**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

55.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 547 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN PIROGOWICZ

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119159**

Amount of Each Disbursement this Period

1.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ANITA DUCK

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119160**

Amount of Each Disbursement this Period

3.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KATHRYN ASFELD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119161**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 548 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LESLIE ST JOHN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119162**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN STROM

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119163**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JERRY COOPER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11916**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

45.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 549 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DONALD HAMMER

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119165**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOE HESKETT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119166**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT JANICKI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119167**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 550 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARY ANN LECAIN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119168**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KATHARINE LIFSEY

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119169**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WAYNE MARTIN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119171**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 551 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GLENN POWELL

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119171**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT RUTHERFORD

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119172**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN TOZZI

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I11917:**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 552 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CLAIRE K. REISS

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119174**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN GASPAR

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119175**

Amount of Each Disbursement this Period

3.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WILLIAM TRUITT

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119171**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1008.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 553 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM RAYMOND MUNN

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119177**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address P.O. BOX 3750

City
BRENTWOODState
TNZip Code
37024Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ANITA FIFE

Candidate Name

BLACKBURN, MARSHA, , MRS.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	8		

FEC Identification Number

C C00376939**Transaction ID : SB23.I119178**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE BRAUN FOR INDIANA

Mailing Address PO BOX 159

City
ZIONSVILLEState
INZip Code
46077Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

BRAUN, MIKE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	8		

FEC Identification Number

C C00653147**Transaction ID : SB23.I11906**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1075.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 554 OF 610

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. RENACCI FOR SENATE

Mailing Address 150 SMOKERISE DRIVE

City
WADSWORTHState
OHZip Code
44281Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

RENACCI, JAMES, B., ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
05	/	15	/	2018

FEC Identification Number

C C00466359**Transaction ID : SB23.I119060**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

12207.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 555 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. BRATTON, JOE, , ,

Mailing Address P.O. BOX 878

City
ODESSAState
FLZip Code
33556Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		25		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BROADHURST, JOHN, , ,

Mailing Address 14362 WESTFALL RD.

City
MILANState
MIZip Code
48160Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BROADHURST, JOHN, , ,

Mailing Address 14362 WESTFALL RD.

City
MILANState
MIZip Code
48160Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 556 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. BROADHURST, JOHN, , ,

Mailing Address 14362 WESTFALL RD.

City
MILANState
MIZip Code
48160Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRYANT, VERNON, , ,

Mailing Address 1712 CARLETON AVE.

City
FORT WORTHState
TXZip Code
76107Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BRYANT, VERNON, , ,

Mailing Address 1712 CARLETON AVE.

City
FORT WORTHState
TXZip Code
76107Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

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).....▶

1100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 557 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. BRYANT, VERNON, , ,

Mailing Address 1712 CARLETON AVE.

City
FORT WORTHState
TXZip Code
76107Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRYANT, VERNON, , ,

Mailing Address 1712 CARLETON AVE.

City
FORT WORTHState
TXZip Code
76107Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C**Transaction ID : SB28A.I1190**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1025.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 558 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184I**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184I**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184I**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 559 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1184'**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I11841**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1184**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 560 OF 610

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<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Full Name (Last, First, Middle Initial)

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Mailing Address 232 HENRICKS CT.

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ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB28A.I1184'

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

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INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
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☐ PresidentDisbursement For:
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☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB28A.I11841

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOUDY, JOHN, , ,

Mailing Address 232 HENRICKS CT.

City
ANGOLAState
INZip Code
46703Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB28A.I1184

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 561 OF 610

<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

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☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1184'**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HORNACK, JANMARIE, , ,

Mailing Address 9816 FARLEY LANE

City
SHAWNEE MISSIONState
KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1183e**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HORNACK, JANMARIE, , ,

Mailing Address 9816 FARLEY LANE

City
SHAWNEE MISSIONState
KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 562 OF 610

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<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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A. HORNACK, JANMARIE, , ,

Mailing Address 9816 FARLEY LANE

City
SHAWNEE MISSIONState
KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

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KSZip Code
66212Purpose of Disbursement
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Office Sought: ☐ House
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☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 563 OF 610

<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

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A. HORNACK, JANMARIE, , ,

Mailing Address 9816 FARLEY LANE

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SHAWNEE MISSIONState
KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
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☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

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25.00

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M M M	/	D D D	/	Y Y Y Y Y
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C. HORNACK, JANMARIE, , ,

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KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

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Office Sought: ☐ House
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☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 564 OF 610

<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

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A. HORNACK, JANMARIE, , ,

Mailing Address 9816 FARLEY LANE

City
SHAWNEE MISSIONState
KSZip Code
66212Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HORNACK, JANMARIE, , ,

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KSZip Code
66212Purpose of Disbursement
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☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HUEY, RANDY, , ,

Mailing Address 8462 LOVELESS DR.

City
HOWARD CITYState
MIZip Code
49329Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 565 OF 610

<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

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State: District:

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M M M	/	D D D	/	Y Y Y Y Y
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M M M	/	D D D	/	Y Y Y Y Y
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M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 566 OF 610

<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

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49329Purpose of Disbursement
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☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

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Date of Disbursement

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75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 567 OF 610

<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

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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 568 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. HUEY, RANDY, , ,

Mailing Address 8462 LOVELESS DR.

City
HOWARD CITYState
MIZip Code
49329Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183f**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HUEY, RANDY, , ,

Mailing Address 8462 LOVELESS DR.

City
HOWARD CITYState
MIZip Code
49329Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183f**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 569 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 570 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1183**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1184**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1184**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 571 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1184C

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1184C

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1184C

Amount of Each Disbursement this Period

50.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 572 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184I**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACOBS, JERALD, , ,

Mailing Address 33505 SE 20TH ST.

City
WASHOUGALState
WAZip Code
98671Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C**Transaction ID : SB28A.I1184I**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KEMP, CAROLYN, , ,

Mailing Address 12494 N WOODLAWN DR.

City
MOORESVILLEState
INZip Code
46158Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189I**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 573 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. KEMP, CAROLYN, , ,

Mailing Address 12494 N WOODLAWN DR.

City
MOORESVILLEState
INZip Code
46158Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KEMP, CAROLYN, , ,

Mailing Address 12494 N WOODLAWN DR.

City
MOORESVILLEState
INZip Code
46158Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MENDENHALL, MEL, O, ,Mailing Address 5199 BALDWIN TERRACE
OCity
MARIETTAState
GAZip Code
30068Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB28A.I1187**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

450.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 574 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. OESTREICH, JAMES, , ,

Mailing Address 8830 WOODGROVE CIRCLE

City
GRANITE BAYState
CAZip Code
95746Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OESTREICH, JAMES, , ,

Mailing Address 8830 WOODGROVE CIRCLE

City
GRANITE BAYState
CAZip Code
95746Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OESTREICH, JAMES, , ,

Mailing Address 8830 WOODGROVE CIRCLE

City
GRANITE BAYState
CAZip Code
95746Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

100.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 575 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. OESTREICH, JAMES, , ,

Mailing Address 8830 WOODGROVE CIRCLE

City
GRANITE BAYState
CAZip Code
95746Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OESTREICH, JAMES, , ,

Mailing Address 8830 WOODGROVE CIRCLE

City
GRANITE BAYState
CAZip Code
95746Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 576 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1189!

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1189!

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.I1189

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

105.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 577 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189!**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELTON, FRANK & MARY, , ,

Mailing Address 2106 HOPE STREET

City
BOSSIER CITYState
LAZip Code
71112Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

105.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 578 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. WEISZ, WAYNE, , ,

Mailing Address P.O.BOX 1284

City
LODIState
CAZip Code
95241Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 579 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189!**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189!**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZEIH, RICK, , ,

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 580 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ZEIHNER, RICK, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Mailing Address 7344 OUTER GRAY ST.

City
NEWBURGHState
INZip Code
47630Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A.I1189**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

5820.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 581 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. HEAD, AMANDA, , ,

Mailing Address 1421 N MANSFIELD AVE. APT. 11

City
LOS ANGELESState
CAZip Code
90028Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119023**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEAD, AMANDA, , ,

Mailing Address 1421 N MANSFIELD AVE. APT. 11

City
LOS ANGELESState
CAZip Code
90028Purpose of Disbursement
CAREY ACCT: REIMBURSEMENTS (SEE BELOW)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119024**

Amount of Each Disbursement this Period

747.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
CAREY ACCT: AIRFARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119051**

Amount of Each Disbursement this Period

409.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4747.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 582 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address 6000 N TERMINAL PKWY

City
ATLANTAState
GAZip Code
30337Purpose of Disbursement
CAREY ACCT: AIRFARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

FEC Identification Number

C**Transaction ID : SB29.I119056**

Amount of Each Disbursement this Period

338.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LADAN, LUKA, , ,

Mailing Address 655 MICHIGAN AVE. NE #412

City
WASHINGTONState
DCZip Code
20017Purpose of Disbursement
CAREY ACCT: PR SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

FEC Identification Number

C**Transaction ID : SB29.I119005**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 345 PARK AVENUE

City
SAN JOSEState
CAZip Code
95110Purpose of Disbursement
CAREY ACCT: SOFTWARE FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

FEC Identification Number

C**Transaction ID : SB29.I119021**

Amount of Each Disbursement this Period

20.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5020.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 583 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. ADOBE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

Mailing Address 345 PARK AVENUE

City
SAN JOSEState
CAZip Code
95110Purpose of Disbursement
CAREY ACCT: SOFTWARE FEES

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB29.I119021

Amount of Each Disbursement this Period

79.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		25		2018

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
CAREY ACCT: AIRFARE

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB29.I119026

Amount of Each Disbursement this Period

654.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BELIVE STUDIOS LTD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2018

Mailing Address P.O. BOX 3758

City
HAIFAState
ZZZip Code
31037Purpose of Disbursement
CAREY ACCT: SOFTWARE FEES

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB29.I119021

Amount of Each Disbursement this Period

240.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

974.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 584 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. BEST GUEST MEDIA

Mailing Address P.O. BOX 3034

City
WAYNEState
NJZip Code
07474Purpose of Disbursement
CAREY ACCT: PR SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

FEC Identification Number

C

Transaction ID : SB29.I119017

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C

Transaction ID : SB29.I119011

Amount of Each Disbursement this Period

 8.03☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: E-MAIL HOSTING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C

Transaction ID : SB29.I11901:

Amount of Each Disbursement this Period

 220.00☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 5228.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 585 OF 610

<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

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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
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: DOMAIN NAME RENEWAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C**Transaction ID : SB29.I119014**

Amount of Each Disbursement this Period

175.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: CHARGEBACK FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C**Transaction ID : SB29.I119015**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONNELL DONATELLI, INC.

Mailing Address 117 NORTH SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: LIST PURCHASE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

FEC Identification Number

C**Transaction ID : SB29.I119001**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6175.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 586 OF 610

<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

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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
HERNDONState
VAZip Code
20170Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119018**

Amount of Each Disbursement this Period

 6955.56☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DELANO, JOSHUA, , ,

Mailing Address P.O. BOX 423

City
ORANGFIELDState
TXZip Code
77639Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119050**

Amount of Each Disbursement this Period

 625.00☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HARVEY, WILLIAM, , ,

Mailing Address 3345 MESA VERDE

City
LONGMONTState
COZip Code
80504Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119041**

Amount of Each Disbursement this Period

 2500.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 6955.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 587 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. WALTERS, SETH, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

Mailing Address 7500 WOODSIDE LANE, APT 24

City
LORTONState
VAZip Code
22079Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.I119048**

Amount of Each Disbursement this Period

2625.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DCXL INC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

Mailing Address 250 EXCHANGE PL # B

City
HERNDONState
VAZip Code
20170Purpose of Disbursement
CAREY ACCT: PAYROLL PROCESSING FEES

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.I119047**

Amount of Each Disbursement this Period

1205.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DCXL INC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

Mailing Address 250 EXCHANGE PL # B

City
HERNDONState
VAZip Code
20170Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.I11903**

Amount of Each Disbursement this Period

6955.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6955.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 588 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. DELANO, JOSHUA, , ,

Mailing Address P.O. BOX 423

City
ORANGFIELDState
TXZip Code
77639Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119054**

Amount of Each Disbursement this Period

625.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HARVEY, WILLIAM, , ,

Mailing Address 3345 MESA VERDE

City
LONGMONTState
COZip Code
80504Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119053**

Amount of Each Disbursement this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WALTERS, SETH, , ,

Mailing Address 7500 WOODSIDE LANE, APT 24

City
LORTONState
VAZip Code
22079Purpose of Disbursement
CAREY ACCT: PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I11905;**

Amount of Each Disbursement this Period

2625.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 589 OF 610

<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

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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
HERNDONState
VAZip Code
20170Purpose of Disbursement
CAREY ACCT: PAYROLL PROCESSING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119051**

Amount of Each Disbursement this Period

1205.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DEACON'S

Mailing Address 401 CHURCH ST

City
NASHVILLEState
TNZip Code
37219Purpose of Disbursement
CAREY ACCT: FOOD AND BEVERAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119032**

Amount of Each Disbursement this Period

245.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119000**

Amount of Each Disbursement this Period

16420.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16666.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 590 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. EXTRA SPACE STORAGE

Mailing Address 1022 N HENRY ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: STORAGE FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119022**

Amount of Each Disbursement this Period

206.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HB PARKING LLC

Mailing Address 314 N FILLMORE ST.

City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
CAREY ACCT: PARKING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119019**

Amount of Each Disbursement this Period

170.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAC MANAGEMENT SERVICES LLC

Mailing Address 500 MONTGOMERY ST. STE. 400

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: COMPLIANCE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119000**

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)..... ►

6376.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 591 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. POLITICAL LIST BROKERS, LLC

Mailing Address 107 S. WEST ST PMB 826

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119009**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. POLITICAL LIST BROKERS, LLC

Mailing Address 107 S. WEST ST PMB 826

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: LIST PURCHASE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119012**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. POLITICAL.LAW

Mailing Address 203 SOUTH UNION STREET SUITE 300

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: LEGAL SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119011**

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)..... ► 11500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 592 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. POLITICAL.LAW

Mailing Address 203 SOUTH UNION STREET SUITE 300

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: REIMBURSEMENTS (SEE BELOW)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119016**

Amount of Each Disbursement this Period

 1619.25☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 SPRING HILL RD
SUITE 400City
VIENNAState
VAZip Code
22182Purpose of Disbursement
CAREY ACCT: COMPLIANCE SOFTWARE FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119057**

Amount of Each Disbursement this Period

 1500.00☒ Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
CAREY ACCT: POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119051**

Amount of Each Disbursement this Period

 119.25☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1619.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 593 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. POLITICAL.LAW

Mailing Address 203 SOUTH UNION STREET SUITE 300

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: LEGAL SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	5		3	0		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119030**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PRICELINE

Mailing Address 800 CONNECTICUT AVENUE

City
NORWALKState
CTZip Code
06854Purpose of Disbursement
CAREY ACCT: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	5		2	5		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119027**

Amount of Each Disbursement this Period

643.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SAME DAY PROCESSING

Mailing Address P.O. BOX 251382

City
ST. PAULState
MNZip Code
55125Purpose of Disbursement
CAREY ACCT: CAGING AND PAYMENT PROCESSING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	5		0	3		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I119000**

Amount of Each Disbursement this Period

1174.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16817.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 594 OF 610

<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

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NAME OF COMMITTEE (In Full)

The Committee To Defend The President

Full Name (Last, First, Middle Initial)

A. SAME DAY PROCESSING

Mailing Address P.O. BOX 251382

City
ST. PAULState
MNZip Code
55125Purpose of Disbursement
CAREY ACCT: CAGING AND PAYMENT PROCESSING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119008**

Amount of Each Disbursement this Period

 1792.10☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE UPS STORE

Mailing Address 107 S WEST ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CAREY ACCT: POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I119028**

Amount of Each Disbursement this Period

 225.48☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
CAREY ACCT: CAB FARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB29.I11903:**

Amount of Each Disbursement this Period

 58.19☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2075.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 595 OF 610

<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. UBER

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
05		31		2018

Mailing Address 1455 MARKET ST
4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
CAREY ACCT: CAB FARE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.I119035

Amount of Each Disbursement this Period

28.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

28.59

91140.88

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 596 OF 610

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Committee To Defend The President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Campaign SolutionsNature 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

297.65

Transaction ID : 04.18a

Amount Incurred This Period

0.00

Payment This Period

297.65

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Campaign SolutionsNature 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

10775.64

Transaction ID : 04.18B

Amount Incurred This Period

0.00

Payment This Period

10775.64

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Infocision Management CorporationNature of Debt (Purpose):
PHONE VOTER CONTACT

Mailing Address P.O. Box 932441

City

Cleveland

State

OH

Zip Code

44193

Outstanding Balance Beginning This Period

3116.70

Transaction ID : 04.18C

Amount Incurred This Period

0.00

Payment This Period

3116.70

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 597 OF 610

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Committee To Defend The President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RIGHT COUNTRY LISTS

Nature of Debt (Purpose):

ONLINE VOTER CONTACT

Mailing Address 117 NORTH SAINT ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : 05.18A

Amount Incurred This Period

22000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

22000.00

2) **TOTALS** This Period (last page this line number only)..... ►

22000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

22000.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : 05.18A

Independent expenditure disseminated in May but not paid until June.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 599 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input type="checkbox"/> Memo Item ALLEGIANCE DIRECT, LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 215 DEPOT CT. SE SUITE 302		Amount <input type="text"/>	
City LEESBURG	State VA	Zip Code 20175	Transaction ID : SE24.116403 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure BUMPER STICKERS		Category/Type <input type="text"/>	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		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 CAMPAIGN HQ PART OF ESTIMATE. SEE SE24.116362.		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	Transaction ID : SE24.118345 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: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<input type="text"/>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<input type="text"/>	
(c) TOTAL 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, , , Signature		Date <input type="text"/> / <input type="text"/> / <input type="text"/>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 600 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ C C00544767	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 04 / 01 / 2018	
Mailing Address 117 N SAINT ASAPH ST.		Amount <input type="text" value="297.65"/>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118330
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 05 / 08 / 2018
Name of Federal Candidate: BLACKBURN, MARSHA, , MRS.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TN
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="297.65"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 04 / 01 / 2018	
Mailing Address 117 N SAINT ASAPH ST.		Amount <input type="text" value="10775.64"/>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118331
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 05 / 08 / 2018
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="909207.78"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="11073.29"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL 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, , , Signature	[Electronically Filed]	Date <input type="text" value="MM/DD/YYYY"/> 04 / 01 / 2018
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 601 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item CAMPAIGN SOLUTIONS PART OF ESTIMATE. SEE SE24.116363		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>05 / 14 / 2018</div> </div>	
Mailing Address 117 N SAINT ASAPH ST.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">40.32</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118346 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>05 / 09 / 2018</div> </div>
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <input type="text"/>	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div> 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 CAMPAIGN SOLUTIONS PART OF ESTIMATE. SEE SE24.116364.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>05 / 01 / 2018</div> </div>	
Mailing Address 117 N SAINT ASAPH ST.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">26251.48</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.119001 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>05 / 31 / 2018</div> </div>
Purpose of Expenditure ONLINE DISTRIBUTION COSTS		Category/Type <input type="text"/>	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">26291.80</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 / /

/ /

05 / 09 / 2018

FEC Schedule E (Form 3X) Rev. 05/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 602 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ C C00544767	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item CAMPAIGN SOLUTIONS PART OF ESTIMATE. SEE SE24.116365		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 01 / 2018	
Mailing Address 117 N SAINT ASAPH ST.		Amount 48912.40	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.119002 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2018
Purpose of Expenditure LIST RENTAL FEES		Category/ Type 	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 909207.78		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 CONNELL DONATELLI, INC.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 16 / 2018	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount 1000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118337 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 15 / 2018
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type 	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 909207.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		49912.40	
(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		Date M M / D D / Y Y Y Y Y Y 05 / 01 / 2018	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 603 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item CONNELL DONATELLI, INC.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118338 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <input type="text"/>	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div>		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 CONNELL DONATELLI, INC.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.118424 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <input type="text"/>	
Name of Federal Candidate: BREDESEN, PHILIP, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State: TN	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">7500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 604 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item INFOCISION MANAGEMENT CORPORATION PART OF ESTIMATE. SEE SE24.115364			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>04 / 22 / 2018</div> </div>	
Mailing Address P.O. BOX 932441			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3116.70</div>	
City CLEVELAND	State OH	Zip Code 44193		
Purpose of Expenditure PHONE VOTER CONTACT		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Transaction ID : SE24.118332 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 02 / 2018</div> </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div>			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 INFOCISION MANAGEMENT CORPORATION PART OF ESTIMATE. SEE SE24.116368			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 01 / 2018</div> </div>	
Mailing Address P.O. BOX 932441			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">428.98</div>	
City CLEVELAND	State OH	Zip Code 44193		
Purpose of Expenditure PHONE VOTER CONTACT		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Transaction ID : SE24.118349 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 10 / 2018</div> </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">3545.68</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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, , ,

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Signature

Date

MM / DD / YYYY

04 / 22 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 605 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00544767 </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item INFOCISION MANAGEMENT CORPORATION PART OF ESTIMATE. SEE SE24.116368			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 / 08 / 2018 </div>	
Mailing Address P.O. BOX 932441			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 24.58 </div> Transaction ID : SE24.118348 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 / 18 / 2018 </div>	
City CLEVELAND	State OH	Zip Code 44193		
Purpose of Expenditure PHONE VOTER CONTACT		Category/ Type 		
Name of Federal Candidate: TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 909207.78 			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 INFOCISION MANAGEMENT CORPORATION PART OF ESTIMATE. SEE SE24.116368			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 / 15 / 2018 </div>	
Mailing Address P.O. BOX 932441			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1491.81 </div> Transaction ID : SE24.118347 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 / 23 / 2018 </div>	
City CLEVELAND	State OH	Zip Code 44193		
Purpose of Expenditure PHONE VOTER CONTACT		Category/ Type 		
Name of Federal Candidate: TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 909207.78 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1516.39
(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, , ,

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Signature

Date

MM / DD / YYYY

05 / 08 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 606 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item RIGHT COUNTRY LISTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 15 / 2018</div> </div>	
Mailing Address 117 NORTH SAINT ASAPH STREET				
City ALEXANDRIA	State VA	Zip Code 22314	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">22000.00</div>	
Purpose of Expenditure ONLINE VOTER CONTACT			Transaction ID : SE24.118339 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 15 / 2018</div> </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div>	

Full Name of Payee <input type="checkbox"/> Memo Item RIGHT COUNTRY LISTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 23 / 2018</div> </div>	
Mailing Address 117 NORTH SAINT ASAPH STREET				
City ALEXANDRIA	State VA	Zip Code 22314	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5500.00</div>	
Purpose of Expenditure ONLINE VOTER CONTACT			Transaction ID : SE24.118343 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 23 / 2018</div> </div>	
Name of Federal Candidate: TRUMP, DONALD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">909207.78</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">27500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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

MM / DD / YYYY

05 / 15 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 607 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item RRTVMEDIA, LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 05 / 07 / 2018 </div>
Mailing Address P.O. BOX 36819			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 25000.00 </div> Transaction ID : SE24.116402 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 05 / 03 / 2018 </div>
City CANTON	State OH	Zip Code 44735	
Purpose of Expenditure TELEVISION ADVERTISING		Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 909207.78			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 RRTVMEDIA, LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 05 / 07 / 2018 </div>
Mailing Address P.O. BOX 36819			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10000.00 </div> Transaction ID : SE24.116404 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 05 / 04 / 2018 </div>
City CANTON	State OH	Zip Code 44735	
Purpose of Expenditure TELEVISION ADVERTISING		Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, ,			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 909207.78			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	▶ 35000.00
(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

MM / DD / YYYY
 05 / 03 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 608 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00544767 </div>
---	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item RRTVMEDIA, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 14 2018 </div>	
Mailing Address P.O. BOX 36819				
City CANTON	State OH	Zip Code 44735	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>	
Purpose of Expenditure TELEVISION ADVERTISING			Transaction ID : SE24.118292 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 10 2018 </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">909207.78</div> 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 RRTVMEDIA, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 31 2018 </div>	
Mailing Address P.O. BOX 36819				
City CANTON	State OH	Zip Code 44735	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9600.00</div>	
Purpose of Expenditure VIDEO PRODUCTION			Transaction ID : SE24.118340 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 05 17 2018 </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">909207.78</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">29600.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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, , ,

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Date

MM / DD / YYYY

05
10
2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 609 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00544767 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item RRTVMEDIA, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address P.O. BOX 36819				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6475.00</div>	
City CANTON		State OH		Zip Code 44735	
Purpose of Expenditure BILLBOARDS				Category/Type 	
Name of Federal Candidate: TRUMP, DONALD, J, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">909207.78</div>				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 RRTVMEDIA, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address P.O. BOX 36819				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4232.35</div>	
City CANTON		State OH		Zip Code 44735	
Purpose of Expenditure BILLBOARDS				Category/Type 	
Name of Federal Candidate: TRUMP, DONALD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">909207.78</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">10707.35</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 05 22 2018 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 610 OF 610
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Committee To Defend The President		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544767 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item RIGHT COUNTRY LISTS PART OF ESTIMATE. SEE SE24.116369		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 05 / 17 / 2018 </div>	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22000.00 </div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.119183 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 06 / 11 / 2018 </div>
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate: TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 1038207.78 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 276677.38 </div>	
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		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 05 / 17 / 2018 </div>	

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