

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Committee To Defend The President**

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

**A. RAY, RANDY, , ,**

Mailing Address 3481 ROCKCLIFF PLACE

City  
LONGWOOD

State  
FL

Zip Code  
32779-3143

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JEUNESSE GLOBAL

Occupation (for Individual)  
CEO

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  
12 / 18 / 2018

**Transaction ID : SA11A.1618696**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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 & GAS INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 27 / 2018

**Transaction ID : SA11A.1619246**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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 & GAS INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 27 / 2018

**Transaction ID : SA11A.1619247**

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