

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cruz for President

A. Full Name (Last, First, Middle Initial)
PEJMAN SALIMPOUR

Mailing Address 15477 VENTURA BLVD, SUITE 202

City State Zip Code
SHERMAN OAKS CA 91403-3013

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

Name of Employer Occupation
DAVID GEFEN SCHOOL OF MEDICINE AT U CLINICAL PROFESSOR OF PEDIATRICS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.422487B

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
PEJMAN SALIMPOUR

Mailing Address 15477 VENTURA BLVD, SUITE 202

City State Zip Code
SHERMAN OAKS CA 91403-3013

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

Name of Employer Occupation
DAVID GEFEN SCHOOL OF MEDICINE CLINICAL PROFESSOR OF PEDIATRICS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.422489

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MS. SARAH SALL

Mailing Address 48150 FOXES BOTTOM RD

City State Zip Code
CADIZ OH 43907-9450

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.464523

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 50.00

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