

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)
MICHAEL MEISTER

Mailing Address 17106 GOLF VISTA CT

City	State	Zip Code
ODESSA	FL	33556-2241

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.198098

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			23			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
THOMAS MELIN

Mailing Address 12855 ELMWOOD RD.

City	State	Zip Code
ELM GROVE	WI	53122-1920

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

Name of Employer	Occupation
INFINITY HEALTHCARE	ANESTHESIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.207126

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
DENNIS D. MELSTROM

Mailing Address 2550 SANDY PLAINS RD. STE. 225 PMB

City	State	Zip Code
MARIETTA	GA	30066-7223

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.204084

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			23			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 200.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

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