

**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)  
**ROBERT FITCH**

Mailing Address 6214 AMICABLE DR.

City ARLINGTON State TX Zip Code 76016-2004

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
349.20

**Transaction ID : SA17.872120**

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
186.00

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM H. FITCH**

Mailing Address 403 FOREST RIDGE DR.

City KERRVILLE State TX Zip Code 78028-3803

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 ▼  
247.00

**Transaction ID : SA17.893306**

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
**JANIS FITZGERALD**

Mailing Address 4834 ELKHORN HILL DR.

City SUWANEE State GA Zip Code 30024-4148

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 ▼  
2089.00

**Transaction ID : SA17.891617**

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
500.00

**Subtotal Of Receipts This Page** (optional).....▶ 696.00

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