

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

DONALD J. TRUMP FOR PRESIDENT, INC.

ADDRESS (number and street)

725 FIFTH AVENUE

Check if different than previously reported. (ACC)

Check if different than previously reported. (ACC)

NEW YORK

NY

10022

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00580100

3. THIS REPORT IS FOR Primary

or General

Primary

or

General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
October 15 (Q3)
July 15 (Q2)
January 31 Year-End Report (YE)

- Feb 20 (M2)
May 20 (M5)
Aug 20 (M8)
Nov 20 (M11)
Mar 20 (M3)
Jun 20 (M6)
Sep 20 (M9)
Dec 20 (M12)
Apr 20 (M4)
Jul 20 (M7)
Oct 20 (M10)
Jan 31 (YE)

Thirtieth day report following the General Election on

Twelfth day report preceding election on in the State of

Is this Report an Amendment?

yes no

5. Covering Period

07 / 01 / 2015

through

09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

TIMOTHY JOST

Signature of Treasurer

TIMOTHY JOST

[Electronically Filed]

Date

12 / 17 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

DONALD J. TRUMP FOR PRESIDENT, INC.

Report Covering the Period: From: / / To: / /

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="487736.16"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="3926511.65"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="4414247.81"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	<input type="text" value="4159474.93"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="254772.88"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="1804747.23"/>
13. EXPENDITURES SUBJECT TO LIMITATION	<input type="text" value="0.00"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	<input type="text" value="3930766.57"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="5440690.92"/>

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Report Covering the Period: From:

M M / D D / Y Y Y Y
07 / 01 / 2015

To:

M M / D D / Y Y Y Y
09 / 30 / 2015

I. RECEIPTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

16. FEDERAL FUNDS (Itemize on Schedule A-P).....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	1041004.55	1094079.55
(ii) unitemized	2776974.38	2816148.71
(iii) Total contributions	3817978.93	3910228.26
(b) Political Party Committees.....	57.62	57.62
(c) Other Political Committees	0.00	0.00
(d) The Candidate.....	100779.63	104829.27
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	3918816.18	4015115.15
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate.....	0.00	1804747.23
(b) Other Loans.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	1804747.23
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	7695.47	9059.72
(b) Fundraising.....	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	7695.47	9059.72
21. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	3926511.65	5828922.10

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2015

To:

MM / DD / YYYY
09 / 30 / 2015

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	4035076.35	5449750.64
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	40050.00	40050.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	84348.58	84348.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	84348.58	84348.58
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	4159474.93	5574149.22

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00580100

DONALD J. TRUMP FOR PRESIDENT, INC.

ADDRESS (number and street) 725 FIFTH AVENUE

NEW YORK

CITY

NY

STATE

10022

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3PA

Transaction ID :

Line 17(a)(ii) consists of contributions from individuals that aggregate \$200 or less for the election cycle to date.

Form/Schedule:

Transaction ID:

**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="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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AJ ABEL

Mailing Address 3520 LEGACY HILLS CRT

City State Zip Code
LONGWOOD FL 32779

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

Name of Employer Occupation
PRODUCERS INC DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.9477

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROGER ABLAMIS

Mailing Address 144 MAGNESON LOOP

City State Zip Code
LOS GATOS CA 95032

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

Name of Employer Occupation
A AND M MOTOR SUPPLY AUTO PARTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.9535

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
AARON ADAIR

Mailing Address P.O.BOX- 510092

City State Zip Code
KEALIA HI 96751

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 ▼
500.00

Transaction ID : SA17A.9716

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... 1000.00

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

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES ADAMS

Mailing Address 2816 FRAZER ROAD

City State Zip Code
NEWARK DE 19702

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NETJETS AVIATION PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.9839

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
JAMES ADAMS

Mailing Address 2816 FRAZER ROAD

City State Zip Code
NEWARK DE 19702

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NETJETS AVIATION PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.9840

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

<input type="text" value="49.90"/>

C. Full Name (Last, First, Middle Initial)
LEE ADAMS

Mailing Address 17441 120TH AVE

City State Zip Code
INDIANOLA IA 50125

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DANLEE CORP OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.9880

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 11 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

<p>A. Full Name (Last, First, Middle Initial) PAUL ADAMS</p> <p>Mailing Address 2935 CHERRY GROVE RD</p> <p>City BALL GROUND State GA Zip Code 30107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF EMPLOYED ,METICULOUS WOODWOR Occupation CABINET MAKER</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 222.33</p>		<p>Transaction ID : SA17A.9905</p> <p>Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>14</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table> </p> <p>Amount of Each Receipt this Period 100.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	08			14			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			14			2015																
<p>B. Full Name (Last, First, Middle Initial) ROBERT ADAMS</p> <p>Mailing Address 225 CATALPA ROAD</p> <p>City LEXINGTON State KY Zip Code 40502</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AMERIPRISE Occupation SALES</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Transaction ID : SA17A.9920</p> <p>Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>21</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table> </p> <p>Amount of Each Receipt this Period 250.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	08			21			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			21			2015																
<p>C. Full Name (Last, First, Middle Initial) WILLIAM ADAMS</p> <p>Mailing Address 2654 FAIRWOOD DR</p> <p>City NEW BRAUNFELS State TX Zip Code 78132</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Transaction ID : SA17A.9962</p> <p>Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>20</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table> </p> <p>Amount of Each Receipt this Period 250.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	08			20			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			20			2015																

Subtotal Of Receipts This Page (optional).....▶ **600.00**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN ADKINS

Mailing Address 605 E. PALM ST.

City	State	Zip Code
WINTER GARDEN	FL	34787

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 : SA17A.10056

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
DAVID ADLER

Mailing Address 210 TWIN OAKS TERRACE

City	State	Zip Code
WESTFIELD	NJ	07090

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

Name of Employer	Occupation
MCCARTER & ENGLISH LLP	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.10067

Date of Receipt

M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
DANIEL AGIUS

Mailing Address 426 FEDERAL ROAD

City	State	Zip Code
BROOKFIELD	CT	06804

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

Name of Employer	Occupation
NORDEX, INCORPORATED	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.10144

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 750.00

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

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HOWARD AHOLA

Mailing Address 1212 SIR LANCELOT DRIVE

City	State	Zip Code
CHESAPEAKE	VA	23323

FEC ID number of contributing federal political committee.

C

Name of Employer
URS

Occupation
GENERAL MECHANIC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.10271

Date of Receipt

MM / DD / YYYY
08 / 07 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
GARY LEE AKINS

Mailing Address 7401 COUNTY ROAD 41

City	State	Zip Code
ARLEY	AL	35541

FEC ID number of contributing federal political committee.

C

Name of Employer
WILLIAMS GROCERY

Occupation
MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

444.19

Transaction ID : SA17A.10371

Date of Receipt

MM / DD / YYYY
09 / 05 / 2015

Amount of Each Receipt this Period

444.19

C. Full Name (Last, First, Middle Initial)
ANN ALBRIGHT

Mailing Address 111 S SUPERIOR
#E

City	State	Zip Code
TOLEDO	OH	43604

FEC ID number of contributing federal political committee.

C

Name of Employer
SWAN CREEK CANDLE CO.

Occupation
OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.10488

Date of Receipt

MM / DD / YYYY
07 / 05 / 2015

Amount of Each Receipt this Period

2700.00

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

3205.02

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

WINTHROP ALDRICH

Mailing Address 359 SLAWSON LANE

City	State	Zip Code
KILLEEN	TX	76542

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

Name of Employer	Occupation
CORSAIR TURBINES, LLC	PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.10554

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

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

WINTHROP ALDRICH

Mailing Address 359 SLAWSON LANE

City	State	Zip Code
KILLEEN	TX	76542

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

Name of Employer	Occupation
CORSAIR TURBINES, LLC	PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.10555

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

MIKE ALLBEE

Mailing Address 11600 95TH AVE N

City	State	Zip Code
MAPLE GROVE	MN	55369

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
351.04

Transaction ID : SA17A.10835

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

235.57

Subtotal Of Receipts This Page (optional).....▶ 585.57

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ARTHUR ALLEN

Mailing Address 16935 ADEL HWY

City State Zip Code
BARNEY GA 31625

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

Name of Employer Occupation
ARTHUR ALLEN UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
432.25

Transaction ID : SA17A.10854

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period
362.28

B. Full Name (Last, First, Middle Initial)
CARL ALLEN

Mailing Address 501 GATEWAY PARKWAY

City State Zip Code
ROANOKE TX 76262

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

Name of Employer Occupation
HERITAGE BAG EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.10871

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period
5400.00

C. Full Name (Last, First, Middle Initial)
CARL ALLEN

Mailing Address 501 GATEWAY PARKWAY

City State Zip Code
ROANOKE TX 76262

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

Name of Employer Occupation
HERITAGE BAG EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149683

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Redesignate:

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]

Subtotal Of Receipts This Page (optional).....▶ 5762.28

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CARL ALLEN

Mailing Address 501 GATEWAY PARKWAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HERITAGE BAG	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149684

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Redesignate: GENERAL

Amount of Each Receipt this Period

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
GREGORY ALLEN

Mailing Address 25426 EDGEMONT DRIVE

City	State	Zip Code
SOUTHFIELD	MI	48033

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.10905

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GREGORY ALLEN

Mailing Address 25426 EDGEMONT DRIVE

City	State	Zip Code
SOUTHFIELD	MI	48033

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.10906

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GREGORY ALLEN

Mailing Address 25426 EDMONT DRIVE

City State Zip Code
SOUTHFIELD MI 48033

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

Name of Employer Occupation
SELF-EMPLOYED MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
305.00

Transaction ID : SA17A.10907

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
HAROLD ALLEN

Mailing Address 1093 A1A BEACH BLVD

City State Zip Code
ST AUGUSTINE FL 32080

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

Name of Employer Occupation
SPECTRUM ORTHOPEDIC SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.10911

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LAURENCE ALLEN

Mailing Address 6830
43 MAPLE AVENUE

City State Zip Code
GREENWICH CT 06830

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

Name of Employer Occupation
NYPPEX HOLDINGS LLC PRIVATE EQUITY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.10955

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 775.00

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RONALD ALLEN

Mailing Address 5603 IKE SMITH RD

City	State	Zip Code
PLANT CITY	FL	33565

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	MODULAR HOME SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.11012

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GEORGE ALLIBONE

Mailing Address 3749 INWOOD DRIVE

City	State	Zip Code
HOUSTON	TX	77019

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	MEDICALDOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.11102

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DAVID ALLINGHAM

Mailing Address 10697 OAKTON RIDGE CT

City	State	Zip Code
OAKTON	VA	22124

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.11110

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

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

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

WILLIAM ALLMON

Mailing Address VIA LA MESA
5530A

City LAGUNA WOODS State CA Zip Code 92637

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.11151

Date of Receipt

08 / 16 / 2015

Amount of Each Receipt this Period

250.00

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

RONALD AMATI

Mailing Address 80 HILLCREST DR.

City CHARLEROI State PA Zip Code 15022

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

Name of Employer SELF EMPLOYED Occupation HOME INSPECTOR AND RADON MITIGATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
258.04

Transaction ID : SA17A.11448

Date of Receipt

08 / 28 / 2015

Amount of Each Receipt this Period

258.04

C. Full Name (Last, First, Middle Initial)

AMEDEO AMATO

Mailing Address 7424 NEW UTRECHT AVENUE

City BROOKLYN State NY Zip Code 11204

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

Name of Employer NATIONWIDE INS CO Occupation INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.11452

Date of Receipt

07 / 27 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional) **758.04**

Total This Period (last page this line number only) **758.04**

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.31

Transaction ID : SA17A.11453

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

Amount of Each Receipt this Period
50.31

B. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
373.14

Transaction ID : SA17A.11454

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
72.83

C. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
659.37

Transaction ID : SA17A.11455

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
286.23

Subtotal Of Receipts This Page (optional)..... **409.37**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1006.22**

Transaction ID : SA17A.11467

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
346.85

B. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1393.93**

Transaction ID : SA17A.11460

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
387.71

C. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1803.14**

Transaction ID : SA17A.11463

Date of Receipt
 M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period
409.21

Subtotal Of Receipts This Page (optional).....▶ **1143.77**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 22 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AMEDEO AMATO

Mailing Address **7424 NEW UTRECHT AVENUE**

City **BROOKLYN** State **NY** Zip Code **11204**

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

Name of Employer **NATIONWIDE INS CO** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ **2200.95**

Transaction ID : SA17A.11466

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2015

Amount of Each Receipt this Period
397.81

B. Full Name (Last, First, Middle Initial)
SHARMAI AMBER

Mailing Address **PO BOX 253
432038 POHAKEA MAUKA RD**

City **PAAUILO** State **HI** Zip Code **96776**

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

Name of Employer **SELF EMPLOYED** Occupation **SPIRITUAL PSYCHIC SOUL THERAPIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ **500.00**

Transaction ID : SA17A.11482

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHRIS AMENSON

Mailing Address **620 FOREST VIEW WAY**

City **MONUMENT** State **CO** Zip Code **80132**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.11525

Date of Receipt
M M / D D / Y Y Y Y
07 / 19 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1147.81**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN AMICK

Mailing Address **BOX 465**

City State Zip Code
DONIPHAN NE 68832

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

Name of Employer Occupation
AMICK REALTY BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.11573

Date of Receipt
M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN AMORATIS

Mailing Address **800 RIDGEWOOD ROAD**

City State Zip Code
TOWNSHIP OF WASHINGTON NJ 07676

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

Name of Employer Occupation
ISLAND WAY INC RESTAURANTEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.11611

Date of Receipt
M M / D D / Y Y Y Y
09 12 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JACK AMYX

Mailing Address **6703 CHILDS ROAD**

City State Zip Code
CORRYTON TN 37721

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

Name of Employer Occupation
FOUNTAIN CITY FINANCE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.11635

Date of Receipt
M M / D D / Y Y Y Y
08 11 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 24 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ANDREW ANDERSON		Transaction ID : SA17A.11717
Mailing Address 3 CAROL LANE		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2015
City BLACKSTONE	State MA	Zip Code 01504
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer CVS	Occupation BENEFITS ANALYST	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) BARBARA ANDERSON		Transaction ID : SA17A.11729
Mailing Address 10511 W 49TH PLACE		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2015
City SHAWNEE	State KS	Zip Code 66203
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 246.15
Name of Employer DREWCO	Occupation SELF EMPLOYED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 246.15	

C. Full Name (Last, First, Middle Initial) BARBARA ANDERSON		Transaction ID : SA17A.11730
Mailing Address 10511 W 49TH PLACE		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2015
City SHAWNEE	State KS	Zip Code 66203
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00
Name of Employer DREWCO	Occupation SELF EMPLOYED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 346.15	

Subtotal Of Receipts This Page (optional)..... 596.15

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID ANDERSON

Mailing Address **64 E WINCHESTER ST**
210

City **MURRAY** State **UT** Zip Code **84107**

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

Name of Employer **INVESTMENT DECISION C** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.11825

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MELANIE ANDREWS

Mailing Address **12 WASHINGTON SQUARE**

City **MARBLEHEAD** State **MA** Zip Code **01945**

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

Name of Employer **ACTION GRAPHICS LLC** Occupation **OWNER/DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.12265

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM ANGELO

Mailing Address **PO BOX 214**

City **LITTLE FALLS** State **NJ** Zip Code **07424**

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

Name of Employer **FIRST HOLDING LLC** Occupation **ADVERTISING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
267.37

Transaction ID : SA17A.12348

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **600.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM ANGELO

Mailing Address PO BOX 214

City State Zip Code
LITTLE FALLS NJ 07424

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

Name of Employer Occupation
FIRST HOLDING LLC ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
349.91

Transaction ID : SA17A.12349

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
82.54

B. Full Name (Last, First, Middle Initial)
WILLIAM ANGELO

Mailing Address PO BOX 214

City State Zip Code
LITTLE FALLS NJ 07424

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

Name of Employer Occupation
FIRST HOLDING LLC ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
475.57

Transaction ID : SA17A.12350

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
125.66

C. Full Name (Last, First, Middle Initial)
LOUIS ANGELUCCI

Mailing Address 212 HYACINTH DR.

City State Zip Code
YARDLEY PA 19067

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

Name of Employer Occupation
SELF EMPLOYED ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
283.45

Transaction ID : SA17A.12359

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
83.45

Subtotal Of Receipts This Page (optional).....▶ 291.65

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARC ANIDJAR

Mailing Address 12 SE 7TH ST
STE 604

City State Zip Code
FORT LAUDERDALE FL 33021

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

Name of Employer Occupation
ANIDJAR & LEVINE ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
267.29

Transaction ID : SA17A.12391

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2015

Amount of Each Receipt this Period
267.29

B. Full Name (Last, First, Middle Initial)
FRANCINE ANTON

Mailing Address 18026 PETTY LANE

City State Zip Code
SPRING LAKE MI 49456

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 ▼
273.96

Transaction ID : SA17A.12517

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
23.96

C. Full Name (Last, First, Middle Initial)
CHARLES P ARAKELIAN

Mailing Address 5 DRIFTWOOD LANE

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
BAY STATE POOLS INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Transaction ID : SA17A.12721

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
800.00

Subtotal Of Receipts This Page (optional).....▶ 1091.25

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALICE ARAUJO

Mailing Address P O BOX 422077

City State Zip Code
DEL RIO TX 78842

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

Name of Employer Occupation
ALI ENTERPRISE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
236.25

Transaction ID : SA17A.12738

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period
133.40

B. Full Name (Last, First, Middle Initial)
BRAD ARMSTRONG

Mailing Address 206 WESTWOOD TER
78746

City State Zip Code
WEST LAKE HILLS TX 78746

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

Name of Employer Occupation
BRAD ARMSTRONG ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.12944

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SUNNY AROUSTAMIAN

Mailing Address 40 CHILTON RD

City State Zip Code
BROCKTON MA 02301

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.13178

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
400.00

Subtotal Of Receipts This Page (optional).....▶ 783.40

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VITTORIO ARTIANO

Mailing Address **6 COMMERCE WAY**

City State Zip Code
CARVER MA 02330

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

Name of Employer Occupation
SELF CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.13263

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
FERNANDO ARZOLA

Mailing Address **943 CAMPBELL AVE**

City State Zip Code
LAKE WALES FL 33853

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.13302

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			09			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
CHARLES ATKERSON

Mailing Address **4025 VICKY ST**

City State Zip Code
BIG SPRING TX 79720

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

Name of Employer Occupation
FAIRVIEW SUPPLY, LLC OWNER/GERNERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.13520

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT AURAY, JR

Mailing Address **610 BERKSHIRE DRIVE**

City **PITTSBURGH** State **PA** Zip Code **15215**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.13691

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JUDITH AUSTIN

Mailing Address **403 ORCHARD DRIVE**

City **SOUTH POINT** State **OH** Zip Code **45680**

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

Name of Employer **FARLEY DENTAL** Occupation **DENTAL HYGIENIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.13733

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JULIE AUSTIN

Mailing Address **2785 GRAYMOSS DR**

City **CLEMMONS** State **NC** Zip Code **27012**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.13738

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **3300.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JULIE AUSTIN		Transaction ID : SA17A.13739	
Mailing Address 2785 GRAYMOSS DR		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015	
City CLEMMONS	State NC	Zip Code 27012	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 350.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) ROBERT AUSTIN		Transaction ID : SA17A.13755	
Mailing Address 25422 TRABUCO RD 105-213		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015	
City LAKE FOREST	State CA	Zip Code 92630	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer PACIFIC LIFE	Occupation SOFTWARE ARCHITECT	Election Cycle-to-Date 500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) BOB AZAR		Transaction ID : SA17A.13938	
Mailing Address 200 GRANDE STREET		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015	
City DRIFTWOOD	State TX	Zip Code 78619	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 260.55	
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 260.55	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional)..... 810.55

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JULES BAGDAN

Mailing Address 1340 GOLF COURSE ROAD

City WEST JEFFERSON State NC Zip Code 28694

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.14224

Date of Receipt

08 / 20 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
BILL BAGLEY

Mailing Address 3920 SMELLEY ROAD

City LONGVIEW State TX Zip Code 75605

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

Name of Employer BAGLEY TRACTOR & EQUIPMENT Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.14232

Date of Receipt

08 / 01 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
ROBERT BAIER

Mailing Address 6825 YALE BRIDGE ROAD

City ROCKTON State IL Zip Code 61072

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
297.70

Transaction ID : SA17A.14291

Date of Receipt

08 / 30 / 2015

Amount of Each Receipt this Period

133.40

Subtotal Of Receipts This Page (optional)..... **633.40**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

ROBERT BAIER

Mailing Address 6825 YALE BRIDGE ROAD

City	State	Zip Code
ROCKTON	IL	61072

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14292

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

<input type="text" value="107.97"/>

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

RICK BAKER

Mailing Address 5392 CLIFTON ROAD

City	State	Zip Code
JACKSONVILLE	FL	32211

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FLORIDA ROADS	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14690

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial)

LEE BAKEWELL

Mailing Address 5313 YELLOW SAGE CIRCLE

City	State	Zip Code
LAS VEGAS	NV	89149

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14743

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

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

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

SCHEDULE A-P
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NICK BAKKER

Mailing Address 1394 PURDYTOWN TURNPIKE

City	State	Zip Code
HAWLEY	PA	18428

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

Name of Employer
RETIRED
Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.14753

Date of Receipt
MM / DD / YYYY
07 / 19 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BRIAN BALDWIN

Mailing Address 3 LAWRENCE AVE

City	State	Zip Code
ANTIOCH	CA	94509

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

Name of Employer
CHEVRON INFORMATION TECHNOLOGY
COMPANY
Occupation
COMPUTER ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.14798

Date of Receipt
MM / DD / YYYY
07 / 23 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BRIAN BALDWIN

Mailing Address 3 LAWRENCE AVE

City	State	Zip Code
ANTIOCH	CA	94509

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

Name of Employer
CHEVRON INFORMATION TECHNOLOGY
COMPANY
Occupation
COMPUTER ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17A.14799

Date of Receipt
MM / DD / YYYY
07 / 23 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... 450.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN BALDWIN

Mailing Address **3 LAWRENCE AVE**

City State Zip Code
ANTIOCH CA 94509

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

Name of Employer Occupation
CHEVRON INFORMATION TECHNOLOGY CO COMPUTER ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17A.14800

Date of Receipt
M M / D D / Y Y Y Y
07 24 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. MARK BALDWIN

Mailing Address **5 PRIDES CIR**

City State Zip Code
ANDOVER MA 01810

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

Name of Employer Occupation
BALDWIN CRANE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.14832

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
CORY BALL

Mailing Address **12965 HARBOR POINT DR**

City State Zip Code
PLATTE CITY MO 64079

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 ▼
228.28

Transaction ID : SA17A.14868

Date of Receipt
M M / D D / Y Y Y Y
08 21 2015

Amount of Each Receipt this Period
128.28

Subtotal Of Receipts This Page (optional)..... **478.28**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 36 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

JOHN BALL

Mailing Address 13306 LACEBARK PINE RD

City	State	Zip Code
ORLANDO	FL	32832

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNITED AIRLINES	B777 CAPT.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14880

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			13			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

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

CHARLES BALLADARES

Mailing Address PO BOX 8642

City	State	Zip Code
MANDEVILLE	LA	70470

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MICRO-AGE ACCOUNTING	ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14920

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)

CHARLES BALLADARES

Mailing Address PO BOX 8642

City	State	Zip Code
MANDEVILLE	LA	70470

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MICRO-AGE ACCOUNTING	ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.14921

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			26			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

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

<input type="text" value="700.00"/>

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

<input type="text" value="700.00"/>

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHARLES BALLADARES

Mailing Address PO BOX 8642

City	State	Zip Code
MANDEVILLE	LA	70470

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

Name of Employer	Occupation
MICRO-AGE ACCOUNTING	ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.14922

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
ANGELO R BAMBO

Mailing Address 77 MELWEX STREET

City	State	Zip Code
BELLEVILLE	NJ	07109

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

Name of Employer	Occupation
HARRIS CORP.	TECHNICAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 214.16

Transaction ID : SA17A.15085

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

Amount of Each Receipt this Period
 _____ 105.93

C. Full Name (Last, First, Middle Initial)
ANGELO R BAMBO

Mailing Address 77 MELWEX STREET

City	State	Zip Code
BELLEVILLE	NJ	07109

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

Name of Employer	Occupation
HARRIS CORP.	TECHNICAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 342.13

Transaction ID : SA17A.15111

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			17			2015			

Amount of Each Receipt this Period
 _____ 127.97

Subtotal Of Receipts This Page (optional).....▶ _____ 333.90

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 38 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANGELO R BAMBO

Mailing Address **77 MELWEX STREET**

City State Zip Code
BELLEVILLE NJ 07109

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

Name of Employer Occupation
HARRIS CORP. TECHNICAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
470.10

Transaction ID : SA17A.15090

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

Amount of Each Receipt this Period

127.97

B. Full Name (Last, First, Middle Initial)
MAHMUD BANGASH MD

Mailing Address **10-14 SADDLE RIVER RD**

City State Zip Code
FAIR LAWN NJ 74105

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.149455

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
JOHN BARDACINO

Mailing Address **8257 CAMPBELL SPRINGS AVE**

City State Zip Code
LAS VEGAS NV 89178

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

Name of Employer Occupation
COLLEGE OF SOUTHERN NEVADA ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
208.45

Transaction ID : SA17A.15439

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			16			2015			

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....▶ **727.97**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOHN BARDACINO		Transaction ID : SA17A.15440
Mailing Address 8257 CAMPBELL SPRINGS AVE		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2015
City LAS VEGAS	State NV	Amount of Each Receipt this Period _____ 100.00
Zip Code 89178	FEC ID number of contributing federal political committee. C	
Name of Employer COLLEGE OF SOUTHERN NEVADA	Occupation ANALYST	Amount of Each Receipt this Period _____ 308.45
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 308.45	

B. Full Name (Last, First, Middle Initial) DIANE BARDWELL		Transaction ID : SA17A.15458
Mailing Address PO BOX 9007		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015
City BOSTON	State MA	Amount of Each Receipt this Period _____ 500.00
Zip Code 02114	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period _____ 500.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 500.00	

C. Full Name (Last, First, Middle Initial) CLINTON J BARKER		Transaction ID : SA17A.15509
Mailing Address 844 9TH AVE		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015
City HONOLULU	State HI	Amount of Each Receipt this Period _____ 552.76
Zip Code 96816	FEC ID number of contributing federal political committee. C	
Name of Employer UNITED STATES NAVY	Occupation MILITARY POLICE	Amount of Each Receipt this Period _____ 552.76
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 552.76	

Subtotal Of Receipts This Page (optional).....▶ _____ 1152.76

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 40 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CLINTON J BARKER

Mailing Address **844 9TH AVE**

City State Zip Code
HONOLULU HI 96816

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

Name of Employer Occupation
UNITED STATES NAVY MILITARY POLICE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
589.43

Transaction ID : SA17A.15510

Date of Receipt
M M / D D / Y Y Y Y
09 23 2015

Amount of Each Receipt this Period
36.67

B. Full Name (Last, First, Middle Initial)
ALISON BARKLEY

Mailing Address **1892 FALL LINE DRIVE**

City State Zip Code
DRIGGS ID 83422

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 ▼
500.00

Transaction ID : SA17A.15541

Date of Receipt
M M / D D / Y Y Y Y
08 01 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GREGORY BARON

Mailing Address **PO BOX 1123**

City State Zip Code
MAMMOTH LAKES CA 93546

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

Name of Employer Occupation
BARON RESORT PROPERTIES LANDLORD

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
273.76

Transaction ID : SA17A.15813

Date of Receipt
M M / D D / Y Y Y Y
08 19 2015

Amount of Each Receipt this Period
108.48

Subtotal Of Receipts This Page (optional)..... **645.15**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEVNEY BARRETT

Mailing Address 33410 N PALMYRA RD

City	State	Zip Code
WARRENTON	MO	63383

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.15935

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RICH BARRICK

Mailing Address 15907 BOOTH CIRCLE

City	State	Zip Code
VOLENTE	TX	78641

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BASIC IDIQ, INC.	CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.15963

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL BARRON

Mailing Address 9480 S EASTERN

City	State	Zip Code
LAS VEGAS	NV	89123

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LAS VEGAS RAILWAY EXPRESS, INC	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.15987

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	5

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DAVID BARSALOU		Transaction ID : SA17A.16053	
Mailing Address 5710 LONE CEDAR		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2015	
City KINGWOOD	State TX	Zip Code 77345	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 31.67	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 231.67	

B. Full Name (Last, First, Middle Initial) LESLIE BARTER		Transaction ID : SA17A.16093	
Mailing Address 9 IDA LANE		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2015	
City RAYMOND	State NH	Zip Code 03077	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SUMMIT RECORDS MANAGEMENT	Occupation SALES AND MARKETING		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) LESLIE BARTER		Transaction ID : SA17A.16094	
Mailing Address 9 IDA LANE		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2015	
City RAYMOND	State NH	Zip Code 03077	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SUMMIT RECORDS MANAGEMENT	Occupation SALES AND MARKETING		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Subtotal Of Receipts This Page (optional).....▶ 531.67

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STASYI BARTH

Mailing Address **53021 GALLICA STREET**

City **LAKE ELSINORE** State **CA** Zip Code **92532**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16106

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			15			2015			

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SCOTT BARTHELEMY

Mailing Address **3044**

City **FREMONT** State **NH** Zip Code **03044**

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

Name of Employer **SELF** Occupation **SELF**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16112

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			09			2015			

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANTHONY BARTOLOMEO

Mailing Address **1053 SAW MILL RIVER ROAD**

City **YONKERS** State **NY** Zip Code **10710**

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

Name of Employer **ANTHONY BARTOLOMEO** Occupation **ELECTRICAL CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.16173

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			23			2015			

Amount of Each Receipt this Period
260.55

Subtotal Of Receipts This Page (optional)..... **760.55**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BERNARD BARUCH

Mailing Address P.O.BOX 12305

City	State	Zip Code
LA JOLLA	CA	92039

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 : SA17A.16228

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JAMES BASHAW

Mailing Address 1111 BERING
SUITE 801

City	State	Zip Code
HOUSTON	TX	77057

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

Name of Employer Occupation
JAMES E. BASHAW & CO. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16263

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
RAEANN BATES

Mailing Address 22 SOUTH PINEY PLAINS CIRCLE

City	State	Zip Code
THE WOODLANDS	TX	77382

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 ▼
301.98

Transaction ID : SA17A.16408

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2015

Amount of Each Receipt this Period

301.98

Subtotal Of Receipts This Page (optional).....▶ 801.98

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAN BAUGH

Mailing Address 1201 FIRST STREET NORTH #501

City State Zip Code
JACKSONVILLE BEACH FL 32250

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

Name of Employer Occupation
CPI CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16570

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KENT BAUGHMAN

Mailing Address 5981 WHITETAIL LANE

City State Zip Code
JUPITER FL 33458

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

Name of Employer Occupation
SELF EMPLOYED ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.16584

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LEE BAUGHMAN

Mailing Address 6849 HENDERSONVILLE HWY

City State Zip Code
WALTERBORO SC 29488

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

Name of Employer Occupation
SC DEPT OF LLR/OSHA SAFETY INSPECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
237.11

Transaction ID : SA17A.16586

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period
237.11

Subtotal Of Receipts This Page (optional).....▶ 987.11

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BARB BAUMGARN

Mailing Address 2404 NE PARK DR

City State Zip Code
GRIMES IA 50111

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 ▼
500.00

Transaction ID : SA17A.16652

Date of Receipt

M M / D D / Y Y Y Y
08 02 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
TOMMY BAYNARD

Mailing Address 415 CAMERON VALLEY CT

City State Zip Code
SANDY SPRINGS GA 30328

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

Name of Employer Occupation
SELF CONST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16768

Date of Receipt

M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
STEPHEN BAYNHAM

Mailing Address PO BOX 689

City State Zip Code
MONROE GA 30655

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

Name of Employer Occupation
WALTON EYE CARE PHYSICIAN M.D.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16776

Date of Receipt

M M / D D / Y Y Y Y
09 28 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

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

SCHEDULE A-P
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ROBERT BAZYK		Transaction ID : SA17A.16796																				
Mailing Address 59 RAINBOW ROAD		Date of Receipt																				
City EAST GRANBY State CT Zip Code 06026		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>08</td><td></td><td></td><td>26</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	08			26			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			26			2015																
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"><tr><td>2700.00</td></tr></table>	2700.00																			
2700.00																						
Name of Employer COMMAND CORPORATION	Occupation CEO																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"><tr><td>2700.00</td></tr></table>	2700.00																				
2700.00																						

B. Full Name (Last, First, Middle Initial) JUNE BEAMER		Transaction ID : SA17A.16879																				
Mailing Address 1380 W FM 515		Date of Receipt																				
City WINNSBORO State TX Zip Code 75494		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>08</td><td></td><td></td><td>09</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	08			09			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			09			2015																
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"><tr><td>136.47</td></tr></table>	136.47																			
136.47																						
Name of Employer SELF EMPLOYED	Occupation MD																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"><tr><td>236.47</td></tr></table>	236.47																				
236.47																						

C. Full Name (Last, First, Middle Initial) JUNE BEAMER		Transaction ID : SA17A.16880																				
Mailing Address 1380 W FM 515		Date of Receipt																				
City WINNSBORO State TX Zip Code 75494		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>08</td><td></td><td></td><td>09</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	08			09			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
08			09			2015																
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"><tr><td>100.00</td></tr></table>	100.00																			
100.00																						
Name of Employer SELF EMPLOYED	Occupation MD																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"><tr><td>336.47</td></tr></table>	336.47																				
336.47																						

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

2936.47

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

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SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JUNE BEAMER

Mailing Address 1380 W FM 515

City	State	Zip Code
WINNSBORO	TX	75494

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

Name of Employer	Occupation
SELF EMPLOYED	MD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
664.44

Transaction ID : SA17A.16881

Date of Receipt

MM / DD / YYYY
09 / 13 / 2015

Amount of Each Receipt this Period

127.97

B. Full Name (Last, First, Middle Initial)
SCOTT BEAN

Mailing Address 13918 N 146TH LANE

City	State	Zip Code
SURPRISE	AZ	85379

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

Name of Employer	Occupation
IBEW LOCAL 769	HIGH VOLTAGE LINEMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.16890

Date of Receipt

MM / DD / YYYY
08 / 07 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
SCOTT BEAN

Mailing Address 13918 N 146TH LANE

City	State	Zip Code
SURPRISE	AZ	85379

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

Name of Employer	Occupation
IBEW LOCAL 769	HIGH VOLTAGE LINEMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.16891

Date of Receipt

MM / DD / YYYY
09 / 09 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 627.97

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STUART BECHTEL

Mailing Address 205 AIRPORT ROAD

City State Zip Code
GREENVILLE SC 29607

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LOGIX PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17072

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
KENNETH BECKER

Mailing Address 1800 WILSON BLVD

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DEPARTMENT OF VETERANS AFFAIRS EXECUTIVE ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17167

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GREGORY BEDNARSKLI

Mailing Address 635 N. DEARBORN
2505

City State Zip Code
CHICAGO IL 60654

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SIDING & WINDOWS GROUP LTD PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17254

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN BEHRENWALD

Mailing Address P.O. BOX 3655

City	State	Zip Code
LAKE CITY	FL	32056

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17429

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="230.61"/>

B. Full Name (Last, First, Middle Initial)
BOBBY BELDIN

Mailing Address 1519 N ROSS

City	State	Zip Code
MEXIA	TX	76667

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LINN ENERGY	MECHANIC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17514

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
VALENTINE BELFIGLIO

Mailing Address 11505 SONNET DRIVE

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TEXAS WOMAN'S UNIVERSITY	PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17523

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 51 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

DELANO BELLEW

Mailing Address 17816 WILLOW LAKE DR.

City State Zip Code
ODESSA FL 33556

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED PRESIDENT.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17698

Date of Receipt

/ /

Amount of Each Receipt this Period

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

BOBBY BEN-SIMON

Mailing Address 11 SENECA ROAD

City State Zip Code
SCARSDALE NY 10583

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KOS BUILDING GROUP BUILDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17811

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

RSOEMARY BENEDETTO

Mailing Address 439 TARRYTOWN AVENUE

City State Zip Code
STATEN ISLAND NY 10306

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.17870

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:

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(check only one)
 16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DUDLEY BENOIST

Mailing Address 1415 MISSION SPRINGS DR

City State Zip Code
KATY TX 77450

FEC ID number of contributing federal political committee.

Name of Employer Occupation
WG MUSTANG ENG PIPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.18122

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
PAMELA BENSEN

Mailing Address 132 EGRET LN

City State Zip Code
BUFFALO JCT VA 24529

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.18136

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BRIANT BENSON

Mailing Address 1111 LA SIERRA DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BENTEC MEDICAL CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.18151

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHELE BERANEK		Transaction ID : SA17A.18260 Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 891 TRAIL RIDGE RD City State Zip Code AIKEN SC 29803		Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 250.00	

B. Full Name (Last, First, Middle Initial) GLENN BERGEN		Transaction ID : SA17A.18323 Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 10360 E. JEWELL AVE. UNIT 97 City State Zip Code DENVER CO 80247		Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 250.00	

C. Full Name (Last, First, Middle Initial) HOWARD BERKENMEIER		Transaction ID : SA17A.18434 Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2015
Mailing Address 5114 COLONIAL DR City State Zip Code PEARLAND TX 77584		Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer FALCON CREST AVIATION SUPPLY INC.	Occupation EXECUTIVE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ _____ 500.00	

Subtotal Of Receipts This Page (optional).....▶ _____ 1000.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MAX BERLIN Mailing Address 17517 ADRIAN RD. City SOUTHFIELD State MI Zip Code 48075 FEC ID number of contributing federal political committee. C Name of Employer MAX BERLIN Occupation SALES Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 206.44			Transaction ID : SA17A.18459 Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2015 Amount of Each Receipt this Period 102.26
B. Full Name (Last, First, Middle Initial) MARK BERMAN Mailing Address 603 OCEAN AVE 2 EAST City SANTA MONICA State CA Zip Code 90402 FEC ID number of contributing federal political committee. C Name of Employer MARK BERMAN (SELF) Occupation MD - PHYSICIAN Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 231.67			Transaction ID : SA17A.18485 Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015 Amount of Each Receipt this Period 31.67
C. Full Name (Last, First, Middle Initial) JASON BEST Mailing Address 233 GRAND CT S City BLUFFTON State SC Zip Code 29910 FEC ID number of contributing federal political committee. C Name of Employer LOWCOUNTRY COMMUNITY CHURCH Occupation PASTOR Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 249.85			Transaction ID : SA17A.18809 Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2015 Amount of Each Receipt this Period 95.64

Subtotal Of Receipts This Page (optional).....▶ **229.57**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 55 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LARRY BEST

Mailing Address 2221 MCVOID

City State Zip Code
SPRINGTOWN TX 76082

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

Name of Employer Occupation
FLOTEK IND, INC. DIR OF HYD TECHNOLOGY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.18813

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LESLIE BETHEA

Mailing Address 2195 MONTREAT PARKWAY
UNIT A

City State Zip Code
VESTAVIA AL 35216

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

Name of Employer Occupation
UMVIM SEJ CLERICAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.18843

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GARY BETTENCOURTT

Mailing Address 49 PARK LANE

City State Zip Code
FOLSOM LA 70437

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 ▼
244.49

Transaction ID : SA17A.18855

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
244.49

Subtotal Of Receipts This Page (optional).....▶ 994.49

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL BETTS

Mailing Address 6814 WILLAMETTE DR.

City	State	Zip Code
AUSTIN	TX	78723

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BLACKBURN BETTS PLLC	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.18869

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			12			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GARY BIELAT

Mailing Address 519 WHITECAP

City	State	Zip Code
SEABROOK	TX	77586

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CANYON OAKS UNIT FOUR HOMEOWNER'S ASSO	DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.19062

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DON BIGGER

Mailing Address 591 PUTTER LN

City	State	Zip Code
LONGBOAT KEY	FL	34228

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MULTAX CORPORATION	CEO/OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.19104

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

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

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHARLES BIGGERT

Mailing Address 8808 W. RAYFORD

City	State	Zip Code
TOMBALL	TX	77375

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

Name of Employer
NUDAWN METAL FABRICATION, INC

Occupation
CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.19110

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
CHARLES BIGGERT

Mailing Address 8808 W. RAYFORD

City	State	Zip Code
TOMBALL	TX	77375

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

Name of Employer
NUDAWN METAL FABRICATION, INC

Occupation
CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
351.37

Transaction ID : SA17A.19111

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

101.37

C. Full Name (Last, First, Middle Initial)
JOHN BIRCH

Mailing Address 5 FOX RUN

City	State	Zip Code
EAST SANDWICH	MA	02537

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

Name of Employer
BIRCH PAINTING

Occupation
PAINTING CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.19287

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional)..... **851.37**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANITA M BJORKKLUND

Mailing Address 51355 N 395TH AVE

City State Zip Code
WICKENBURG AZ 85390

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 ▼
500.00

Transaction ID : SA17A.19533

Date of Receipt
M M / D D / Y Y Y Y
08 09 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
TERESA B BLACKLOCK

Mailing Address 9609 KINGSTON ROAD

City State Zip Code
SHREVEPORT LA 71118

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 ▼
328.46

Transaction ID : SA17A.19651

Date of Receipt
M M / D D / Y Y Y Y
09 16 2015

Amount of Each Receipt this Period
164.23

C. Full Name (Last, First, Middle Initial)
TERESA B BLACKLOCK

Mailing Address 9609 KINGSTON ROAD

City State Zip Code
SHREVEPORT LA 71118

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 ▼
492.69

Transaction ID : SA17A.19652

Date of Receipt
M M / D D / Y Y Y Y
09 16 2015

Amount of Each Receipt this Period
164.23

Subtotal Of Receipts This Page (optional).....▶ 828.46

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) TERESA B BLACKLOCK		Transaction ID : SA17A.19653	
Mailing Address 9609 KINGSTON ROAD		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015	
City SHREVEPORT	State LA	Zip Code 71118	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 656.92	
		Amount of Each Receipt this Period 164.23	

B. Full Name (Last, First, Middle Initial) TERESA B BLACKLOCK		Transaction ID : SA17A.19654	
Mailing Address 9609 KINGSTON ROAD		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015	
City SHREVEPORT	State LA	Zip Code 71118	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 821.15	
		Amount of Each Receipt this Period 164.23	

C. Full Name (Last, First, Middle Initial) CHARLES BLACKWELL		Transaction ID : SA17A.19697	
Mailing Address 50 BLACKWELL LOOP		Date of Receipt M M / D D / Y Y Y Y 07 / 16 / 2015	
City ELLISVILLE	State MS	Zip Code 39437	
FEC ID number of contributing federal political committee.		C	
Name of Employer SAKALARIOS, BLACKWELL & SCHOCK, PLLC	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	
		Amount of Each Receipt this Period 500.00	

Subtotal Of Receipts This Page (optional).....	828.46
Total This Period (last page this line number only).....	828.46

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MCRAE BLAINE

Mailing Address 1953 KNOLL STREET

City State Zip Code
HOUSTON TX 77080

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

Name of Employer Occupation
MCRAE SERVICES INC CONSULTANT OIL AND GAS INDUSTRY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.19739

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LARRY BLAKE

Mailing Address 500 106TH AVENUE NE
SUTIE 3115

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Occupation
SELF EMPLOYED ASSISTED LIVING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.19806

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
ROBERT BLAKE

Mailing Address 516 E. FAIRWAY RD.

City State Zip Code
HENDERSON NV 89015

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 ▼
223.20

Transaction ID : SA17A.19823

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
23.20

Subtotal Of Receipts This Page (optional).....▶ 2973.20

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

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT BLAKE

Mailing Address 516 E. FAIRWAY RD.

City	State	Zip Code
HENDERSON	NV	89015

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 ▼
 [Amount] 277.86

Transaction ID : SA17A.19824

Date of Receipt

M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period

[Amount] 54.66

B. Full Name (Last, First, Middle Initial)
RICHARD BLAND

Mailing Address 5430 DUDLEY COURT

City	State	Zip Code
PLEASANTON	CA	94566

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

Name of Employer	Occupation
NEWMARK CORNISH & CAREY	REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 [Amount] 500.00

Transaction ID : SA17A.19901

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

[Amount] 500.00

C. Full Name (Last, First, Middle Initial)
PEGGY BLAND EICHELMANN

Mailing Address 136 WESTCOURT LANE

City	State	Zip Code
SAN ANTONIO	TX	78257

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 ▼
 [Amount] 250.00

Transaction ID : SA17A.19905

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

[Amount] 250.00

Subtotal Of Receipts This Page (optional).....▶ [Amount] 804.66

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MELISSA BLAU

Mailing Address **2 EAST 70TH STREET
APT 7A**

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Occupation
IGAMING CAPITAL EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.19996

Date of Receipt
M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period
209.69

B. Full Name (Last, First, Middle Initial)
LARRY BLEIER

Mailing Address **205 WASHINGTON AVENUE**

City State Zip Code
ENDICOTT NY 13760

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

Name of Employer Occupation
LARRY P BLEIER DMD PERIODONTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.20042

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
500.00

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

Mailing Address **1135 ORM AVENUE**

City State Zip Code
PORTSMOUTH OH 45662

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 : SA17A.20184

Date of Receipt
M M / D D / Y Y Y Y
08 23 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **959.69**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MS. DONNA BOCH

Mailing Address **9 STONEGATE LANE**

City State Zip Code
WESTWOOD MA 02090

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.20350

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ERNIE BOCH

Mailing Address **190 SUMNER STREET**

City State Zip Code
NORWOOD MA 02062

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

Name of Employer Occupation
BOCH AUTOMOTIVE GROUP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
86936.80

Transaction ID : SA17A.7395

Date of Receipt
M M / D D / Y Y Y Y
08 28 2015

In-kind - EVENT CATERING - REFUNDED \$84,236.80 ON 9/30

Amount of Each Receipt this Period
86936.80

C. Full Name (Last, First, Middle Initial)
ERIN BODINE

Mailing Address **6729 E CHENEY DRIVE**

City State Zip Code
PARADISE VALLEY AZ 85253

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

Name of Employer Occupation
REBECCA TAYLOR MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
319.28

Transaction ID : SA17A.20412

Date of Receipt
M M / D D / Y Y Y Y
08 21 2015

Amount of Each Receipt this Period
319.28

Subtotal Of Receipts This Page (optional)..... **87756.08**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

ERIN BODINE

Mailing Address 6729 E CHENEY DRIVE

City State Zip Code
PARADISE VALLEY AZ 85253

FEC ID number of contributing federal political committee.

Name of Employer Occupation
REBECCA TAYLOR MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.20413

Date of Receipt

/ /

Amount of Each Receipt this Period

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

NORVELL BODINE

Mailing Address 8435DOGWOOD DR

City State Zip Code
ROCKWELL NC 28138

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.20419

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

CINDY BOLT

Mailing Address 5735 DERBY WAY

City State Zip Code
BULVERDE TX 78163

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.20724

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

MICHAEL BORMASTER

Mailing Address 10080 LITZINGER RD

City SAINT LOUIS State MO Zip Code 63124

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
233.50

Transaction ID : SA17A.21229

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period

57.32

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

JAMES A BOSCO

Mailing Address 905 S WESTWOOD

City ADDISON State IL Zip Code 60101

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

Name of Employer SELF EMPLOYED Occupation LEGAL AND BUSINESS COUNSEL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.43

Transaction ID : SA17A.21328

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period

265.43

C. Full Name (Last, First, Middle Initial)

GEORGE BOSKOVICH III

Mailing Address 2025 JENNIFER PL

City CAMARILLO State CA Zip Code 93012

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

Name of Employer BOSKOVICH FARMS INC. Occupation FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.21353

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 572.75

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CINDY BOUNDS

Mailing Address 1016 SPRING STREET

City	State	Zip Code
WASHINGTON	GA	30673

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

Name of Employer	Occupation
BOUNDS FARMS	PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21539

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09		/	09		/	2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MARILYN BOURNE

Mailing Address 2412 LASTINGHAM DRIVE

City	State	Zip Code
MIDLOTHIAN	VA	23113

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 ▼

Transaction ID : SA17A.21567

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07		/	24		/	2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MARILYN BOURNE

Mailing Address 2412 LASTINGHAM DRIVE

City	State	Zip Code
MIDLOTHIAN	VA	23113

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 ▼

Transaction ID : SA17A.21568

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07		/	26		/	2015			

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARILYN BOURNE

Mailing Address 2412 LASTINGHAM DRIVE

City State Zip Code
MIDLOTHIAN VA 23113

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 ▼
320.00

Transaction ID : SA17A.21569

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MARILYN BOURNE

Mailing Address 2412 LASTINGHAM DRIVE

City State Zip Code
MIDLOTHIAN VA 23113

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 ▼
330.00

Transaction ID : SA17A.21570

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
GUY BOWERS

Mailing Address 8635 W. SAHARA AVENUE; #70

City State Zip Code
LAS VEGAS NV 89117

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

Name of Employer Occupation
N/A INVESTOR-MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.21725

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 360.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 68 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BLEVINS BOWLIN

Mailing Address 10607 LAURIN CT

City	State	Zip Code
UNION	KY	41091

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FRUS LLC	SENIOR MGT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21773

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
DANNY BOWLIN

Mailing Address 4226 ROLLING OAKS DR

City	State	Zip Code
CARROLLTON	TX	75010

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21779

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			23			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)
RICHARD BOYA

Mailing Address 16325 W. ALLISON LANE

City	State	Zip Code
NEW BERLIN	WI	53151

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POWRTEK ENGINEERING, INC	OWNER/ELECTRICAL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21880

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 69 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD BOYA

Mailing Address **16325 W. ALLISON LANE**

City **NEW BERLIN** State **WI** Zip Code **53151**

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

Name of Employer **POWRTEK ENGINEERING, INC** Occupation **OWNER/ELECTRICAL ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
285.26

Transaction ID : SA17A.21881

Date of Receipt

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

Amount of Each Receipt this Period

35.26

B. Full Name (Last, First, Middle Initial)
MICHAEL BOYAJIAN

Mailing Address **516 TOMAHAWK TRAIL**

City **WOODSTOCK** State **GA** Zip Code **30188**

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

Name of Employer **SCOTT PRODUCTIONS INC** Occupation **ASSISTANT PLANT MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.09

Transaction ID : SA17A.21883

Date of Receipt

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

Amount of Each Receipt this Period

205.09

C. Full Name (Last, First, Middle Initial)
MICHAEL BOYAJIAN

Mailing Address **516 TOMAHAWK TRAIL**

City **WOODSTOCK** State **GA** Zip Code **30188**

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

Name of Employer **SCOTT PRODUCTIONS INC** Occupation **ASSISTANT PLANT MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
338.78

Transaction ID : SA17A.21884

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

133.69

Subtotal Of Receipts This Page (optional)..... **374.04**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) WILLIAM C BOYCE <hr/> Mailing Address 35 OLDHAM CIRCLE <hr/> <table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>AMARILLO</td> <td>TX</td> <td>79109</td> </tr> </table> <hr/> FEC ID number of contributing federal political committee. <input type="text" value="C"/> <hr/> <table style="width:100%;"> <tr> <td style="width:50%;">Name of Employer WILLIAMS-BOYCE AGENCY,</td> <td style="width:50%;">Occupation INSURANCE</td> </tr> </table> <hr/> Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	City	State	Zip Code	AMARILLO	TX	79109	Name of Employer WILLIAMS-BOYCE AGENCY,	Occupation INSURANCE	Transaction ID : SA17A.21903 Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>09</td> <td></td> <td></td> <td>17</td> <td></td> <td></td> <td>2015</td> <td></td> <td></td> <td></td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">143.40</td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">305.16</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	09			17			2015																143.40																							305.16										
City	State	Zip Code																																																																									
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B. Full Name (Last, First, Middle Initial) WILLIAM C BOYCE <hr/> Mailing Address 35 OLDHAM CIRCLE <hr/> <table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>AMARILLO</td> <td>TX</td> <td>79109</td> </tr> </table> <hr/> FEC ID number of contributing federal political committee. <input type="text" value="C"/> <hr/> <table style="width:100%;"> <tr> <td style="width:50%;">Name of Employer WILLIAMS-BOYCE AGENCY,</td> <td style="width:50%;">Occupation INSURANCE</td> </tr> </table> <hr/> Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	City	State	Zip Code	AMARILLO	TX	79109	Name of Employer WILLIAMS-BOYCE AGENCY,	Occupation INSURANCE	Transaction ID : SA17A.21904 Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>09</td> <td></td> <td></td> <td>17</td> <td></td> <td></td> <td>2015</td> <td></td> <td></td> <td></td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">117.97</td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">423.13</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	09			17			2015																117.97																							423.13										
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117.97																																																																											
423.13																																																																											

C. Full Name (Last, First, Middle Initial) GWENDOLYN H BOYD <hr/> Mailing Address 710 FOREST GLEN COURT <hr/> <table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>MURFREESBORO</td> <td>TN</td> <td>37128</td> </tr> </table> <hr/> FEC ID number of contributing federal political committee. <input type="text" value="C"/> <hr/> <table style="width:100%;"> <tr> <td style="width:50%;">Name of Employer RETIRED</td> <td style="width:50%;">Occupation RETIRED</td> </tr> </table> <hr/> Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	City	State	Zip Code	MURFREESBORO	TN	37128	Name of Employer RETIRED	Occupation RETIRED	Transaction ID : SA17A.21939 Date of Receipt <table style="width:100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>08</td> <td></td> <td></td> <td>09</td> <td></td> <td></td> <td>2015</td> <td></td> <td></td> <td></td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">50.00</td> </tr> </table> <hr/> Amount of Each Receipt this Period <table style="width:100%; text-align: right;"> <tr> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> <td style="border: 1px solid black; padding: 2px; width: 30px;"> </td> </tr> <tr> <td colspan="11" style="text-align: right;">210.33</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	08			09			2015																50.00																							210.33										
City	State	Zip Code																																																																									
MURFREESBORO	TN	37128																																																																									
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Subtotal Of Receipts This Page (optional).....▶▶▶

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

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

GWENDOLYN H BOYD

Mailing Address 710 FOREST GLEN COURT

City	State	Zip Code
MURFREESBORO	TN	37128

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

Primary General

Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21940

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

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

GWENDOLYN H BOYD

Mailing Address 710 FOREST GLEN COURT

City	State	Zip Code
MURFREESBORO	TN	37128

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

Primary General

Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.21941

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

DANNY BOYLE

Mailing Address 508 SOUTH 14TH STREET
508 SOUTH 14TH STREET

City	State	Zip Code
KANSAS CITY	KS	66105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DELTA INNOVATIVE SERVICES	ROOFER

Receipt For: 2016

Primary General

Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22038

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

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

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN BRAGER

Mailing Address 1609 SARALYNN DR

City	State	Zip Code
SAN JOSE	CA	95121

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYEED	BUISNESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Transaction ID : SA17A.22328

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
LINDA BRALY

Mailing Address 1915 MEDINAH LANE

City	State	Zip Code
GREEN COVE SPRINGS	FL	32043

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 262.36

Transaction ID : SA17A.22383

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
YOLANDE BRANHAM

Mailing Address 25119 N 72ND AVE

City	State	Zip Code
PEORIA	AZ	85383

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.22500

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period
 250.00

Subtotal Of Receipts This Page (optional)..... 3050.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CHRISTOPHER BRANNEN		Transaction ID : SA17A.22517	
Mailing Address 591 MELISSA LN		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2015	
City STATE COLLEGE	State PA	Zip Code 16803	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 266.59	
Name of Employer FREELANCE INVESTMENT CONSULTING AN	Occupation INVESTMENT PROFESSIONAL		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 266.59		

B. Full Name (Last, First, Middle Initial) ROBERT BRANSON		Transaction ID : SA17A.22541	
Mailing Address 83 COUNTRY CLUB RD		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2015	
City WHITEVILLE	State NC	Zip Code 28472	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SELF EMPLOYED	Occupation SECURITY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) JERRY BRASHER		Transaction ID : SA17A.22571	
Mailing Address 11100 HOLLY DR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2015	
City EADS	State TN	Zip Code 38028	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SHERWOOD-TURNER CORP	Occupation DISTRIBUTION		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Subtotal Of Receipts This Page (optional).....▶ 766.59

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) LISA BRASSLER Mailing Address 203 DUNCAN DRIVE City MARYVILLE State TN Zip Code 37803 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer SELF EMPLOYED Occupation PRE-SCHOOL OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>		Transaction ID : SA17A.22581 Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2015 Amount of Each Receipt this Period <input type="text" value="2700.00"/>
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B. Full Name (Last, First, Middle Initial) F BRAUN Mailing Address PO BOX 820254 City VANCOUVER State WA Zip Code 98682 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer FORMER TRUMP/US AIR SHUTTLE PILOT, Occupation AIRLINE PILOT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="238.65"/>		Transaction ID : SA17A.22623 Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015 Amount of Each Receipt this Period <input type="text" value="138.65"/>
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C. Full Name (Last, First, Middle Initial) LOYD BRAY Mailing Address 901 N.LATHROP CT. City CAMERON State MO Zip Code 64429 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		Transaction ID : SA17A.22676 Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
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Subtotal Of Receipts This Page (optional).....

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFF BREAUULT

Mailing Address **8080 E CENTRAL
STE 2**

City **WICHITA** State **KS** Zip Code **67206**

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

Name of Employer **CAREY THOMAS HOOVER & B** Occupation **INVESTMENT ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.12

Transaction ID : SA17A.22701

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
265.12

B. Full Name (Last, First, Middle Initial)
WILLIAM BREAZEALE

Mailing Address **1859 DEVONSHIRE DRIVE**

City **FLORENCE** State **SC** Zip Code **29505**

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

Name of Employer **SOUTHWEST AIRLINES** Occupation **PILOT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Transaction ID : SA17A.22715

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period
201.00

C. Full Name (Last, First, Middle Initial)
WILLIAM BREAZEALE

Mailing Address **1859 DEVONSHIRE DRIVE**

City **FLORENCE** State **SC** Zip Code **29505**

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

Name of Employer **SOUTHWEST AIRLINES** Occupation **PILOT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
266.63

Transaction ID : SA17A.22716

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

Amount of Each Receipt this Period
65.63

Subtotal Of Receipts This Page (optional)..... **531.75**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 76 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

RUBY BREHM

Mailing Address 16438 NE 29TH STREET

City	State	Zip Code
BELLEVUE	WA	98008

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22781

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			28			2015			

Amount of Each Receipt this Period

<input type="text" value="110.66"/>

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

KIRK BRELSFORD

Mailing Address 619 GLOUCESTER LANE

City	State	Zip Code
FOSTER CITY	CA	94404

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22801

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)

RONALD BRENEK

Mailing Address 228 BREWSTER RD

City	State	Zip Code
GRISWOLD	CT	06351

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EBCO	ELECTRICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22819

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

<input type="text" value="286.73"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

PAGE 77 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JULIE BRENNER

Mailing Address P.O. BOX 615

City State Zip Code
MOUNT WOLF PA 17347

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22870

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
JULIE BRENNER

Mailing Address P.O. BOX 615

City State Zip Code
MOUNT WOLF PA 17347

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22871

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value="26.82"/>

C. Full Name (Last, First, Middle Initial)
ROBERT BRENNER

Mailing Address 6506 COASTAL HWY

City State Zip Code
OCEAN CITY MD 21842

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THE FREEDOM CENER INSURANCE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.22877

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 78 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NEIL BRENSINGER

Mailing Address 99 MILLERS RD

City State Zip Code
SCH. HAVEN PA 17972

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 ▼
403.51

Transaction ID : SA17A.22882

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT BRIDGEMAN

Mailing Address 16 SOUTH AVE W #114

City State Zip Code
CRANFORD NJ 07016

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

Name of Employer Occupation
LUBEXPRESS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.23048

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SUE BRIDGES

Mailing Address 40 SMITH-HOLIFIELD RD

City State Zip Code
LAUREL MS 39443

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

Name of Employer Occupation
INTERNATIONAL FIRE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.23103

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SUE BRIDGES

Mailing Address 40 SMITH-HOLIFIELD RD

City LAUREL State MS Zip Code 39443

FEC ID number of contributing federal political committee.

Name of Employer INTERNATIONAL FIRE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23076

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
SUE BRIDGES

Mailing Address 40 SMITH-HOLIFIELD RD

City LAUREL State MS Zip Code 39443

FEC ID number of contributing federal political committee.

Name of Employer INTERNATIONAL FIRE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23077

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
SUE BRIDGES

Mailing Address 40 SMITH-HOLIFIELD RD

City LAUREL State MS Zip Code 39443

FEC ID number of contributing federal political committee.

Name of Employer INTERNATIONAL FIRE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23078

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SUE BRIDGES

Mailing Address 40 SMITH-HOLIFIELD RD

City	State	Zip Code
LAUREL	MS	39443

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INTERNATIONAL FIRE	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23079

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			28			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
KELLIE BRIMBERRY

Mailing Address PO BOX 80589

City	State	Zip Code
SAN MARINO	CA	91118

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23181

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
KELLIE BRIMBERRY

Mailing Address PO BOX 80589

City	State	Zip Code
SAN MARINO	CA	91118

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23182

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			23			2015			

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

JOHN BRINZO

Mailing Address 7331 EDGERTON ROAD

City	State	Zip Code
NORTH ROYALTON	OH	44133

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 ▼
 _____ 1000.00

Transaction ID : SA17A.23244

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period

_____ 1000.00

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

HENRY BRITT

Mailing Address 953 JONES ROAD

City	State	Zip Code
JACKSONVILLE	FL	32220

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

Name of Employer	Occupation
PETTYCO EXPRESS	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.23311

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)

JOHN BRIZZOLARA

Mailing Address 5032 EAST CRESTWOOD DRIVE

City	State	Zip Code
LITTLE ROCK	AR	72207

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

Name of Employer	Occupation
PHYSICIAN	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.23339

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

_____ 1000.00

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

_____ 2250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 82 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANK BROD

Mailing Address 47 SKAGIT KEY

City State Zip Code
BELLEVUE WA 98006

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MICROSOFT ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23416

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
WILLIAM BROUCEK

Mailing Address 18765 GRASS LAKE RD.

City State Zip Code
MANCHESTER MI 48158

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23720

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CECIL BROUSSARD

Mailing Address 15 STEAMBOAT BEND

City State Zip Code
NEW IBERIA LA 70563

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.23742

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EDWARD BROWN

Mailing Address **704 GOLF VIEW DRIVE**

City **GREENVILLE** State **NC** Zip Code **27834**

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

Name of Employer **ORTHOPAEDICS EAST INC** Occupation **ORTHOPEDIC SURGEON**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.23934

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES BROWN

Mailing Address **260 RIVER NORTH DRIVE**

City **ATLANTA** State **GA** Zip Code **30328**

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

Name of Employer **GALILEO SEARCH, LLC** Occupation **SELF-EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.24008

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MIKE BROWN

Mailing Address **12088 RD. 11 SW**

City **ROYAL CITY** State **WA** Zip Code **99357**

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

Name of Employer **B&G FARMS** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **304.70**

Transaction ID : SA17A.24140

Date of Receipt
 M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Receipt this Period
133.69

Subtotal Of Receipts This Page (optional).....▶ **633.69**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 84 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RALPH BROWN

Mailing Address **7509 FLAGSTONE STREET**

City State Zip Code
FORT WORTH TX 76118

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

Name of Employer Occupation
CAPELLON ADMINISTRATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.24168

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
STEPHEN BROWN

Mailing Address **521 SOUTH BROAD STREET
404**

City State Zip Code
PHILADELPHIA PA 19147

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

Name of Employer Occupation
COILPLUS SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.24229

Date of Receipt
M M / D D / Y Y Y Y
08 02 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
VICKI BROWN

Mailing Address **413 ROCK FENCE PLACE**

City State Zip Code
LAWRENCE KS 66049

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 : SA17A.24269

Date of Receipt
M M / D D / Y Y Y Y
07 22 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **850.00**

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

**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
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ZERILDA BROWNING

Mailing Address 4500- W. CARRIAGE LANE

City State Zip Code
PRESCOTT AZ 86305

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 : SA17A.24349

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ZERILDA BROWNING

Mailing Address 4500- W. CARRIAGE LANE

City State Zip Code
PRESCOTT AZ 86305

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 ▼
307.10

Transaction ID : SA17A.24350

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
57.10

C. Full Name (Last, First, Middle Initial)
BILL BROWLEE

Mailing Address PO BOX 713

City State Zip Code
TALLMAN NY 10982

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

Name of Employer Occupation
PURASOFT CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.24352

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 557.10

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. JAMES T BRUSO

Mailing Address 42 BELLEVUE

City State Zip Code
WELLESLEY HILLS MA 02481

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.24618

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MARTIN BRYANT

Mailing Address 5033 ISABELLA PLACE

City State Zip Code
MINT HILL NC 28227

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

Name of Employer Occupation
WASTEQUIP LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.57

Transaction ID : SA17A.24707

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
72.63

C. Full Name (Last, First, Middle Initial)
ANNA BRYSON

Mailing Address 30402 N. HAMPTON RD.

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation
SELF EMPLOYED/CEO IENTERPRISE TECHNOLOGIES INC.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.24751

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 972.63

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN BUCHER

Mailing Address **38 SAPPHIRE PT**

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation
DIALYSIS MANAGEMENT SERVICES, LLC CORPORTAT MANAGER/BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.24839

Date of Receipt
M M / D D / Y Y Y Y
08 10 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
PAUL BUCKEL

Mailing Address **945 C00KS FALLS RD**

City State Zip Code
ROSCOE NY 12776

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

Name of Employer Occupation
SELF EMPLOYED CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
203.79

Transaction ID : SA17A.24899

Date of Receipt
M M / D D / Y Y Y Y
08 16 2015

Amount of Each Receipt this Period
103.79

C. Full Name (Last, First, Middle Initial)
ROBERT BUCKLEY

Mailing Address **114 KNOLL LANE**

City State Zip Code
MARYVILLE TN 37804

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

Name of Employer Occupation
DANNY HERMAN TRUCKING OTR TRUCK DRIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
203.68

Transaction ID : SA17A.24972

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
178.68

Subtotal Of Receipts This Page (optional)..... **532.47**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 88 / 1212

(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL BUDIG

Mailing Address 5304 E SILVER SPUR LN

City State Zip Code
SPOKANE WA 99217

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

Name of Employer Occupation
ARBORISTS OF WASHINGTON PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.25040

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

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
HENRY BULIIFANT

Mailing Address 7301 CHEROKEE ROAD

City State Zip Code
RICHMOND VA 23225

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 : SA17A.25191

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DAVID BULLINGTON

Mailing Address 1029 CHICAMAUGA

City State Zip Code
NASHVILLE TN 37206

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 ▼
310.17

Transaction ID : SA17A.25222

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
201.69

Subtotal Of Receipts This Page (optional).....▶ 951.69

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DEAN BUNDY

Mailing Address 520 TUKWILA DRIVE

City State Zip Code
WOODBURN OR 97071

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF SCIENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.25301

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
DICK BURDICK

Mailing Address 1024 SPANISH TRAIL

City State Zip Code
NEW BRAUNFELS TX 78132

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.25454

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

<input type="text" value="386.66"/>

C. Full Name (Last, First, Middle Initial)
CHARLES BURGESS

Mailing Address 2199 WIDENER TERRACE

City State Zip Code
WELLINGTON FL 33414

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.25517

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			13			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 90 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

CHARLES BURGESS

Mailing Address 2199 WIDENER TERRACE

City	State	Zip Code
WELLINGTON	FL	33414

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

Name of Employer	Occupation
SELF-EMPLOYED	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Transaction ID : SA17A.25518

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

_____ 100.00

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

CHERYL BURNS

Mailing Address 30251 GOLDEN LANTERN #E163

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

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 ▼
 _____ 206.28

Transaction ID : SA17A.25789

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			27			2015			

Amount of Each Receipt this Period

_____ 57.93

C. Full Name (Last, First, Middle Initial)

DAVID BURNS

Mailing Address P.O. BOX 271

City	State	Zip Code
HOLTSVILLE	NY	11742

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

Name of Employer	Occupation
THE BURMAX CO, INC.	WAREHOUSE WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 303.02

Transaction ID : SA17A.25803

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			29			2015			

Amount of Each Receipt this Period

_____ 303.02

Subtotal Of Receipts This Page (optional).....▶ _____ 460.95

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 91 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

DAVID BURNS

Mailing Address P.O. BOX 271

City State Zip Code
HOLTSVILLE NY 11742

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THE BURMAX CO, INC. WAREHOUSE WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.25804

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			05			2015			

Amount of Each Receipt this Period

<input type="text" value="242.01"/>

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

DAVID BURNS

Mailing Address P.O. BOX 271

City State Zip Code
HOLTSVILLE NY 11742

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THE BURMAX CO, INC. WAREHOUSE WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.25805

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			26			2015			

Amount of Each Receipt this Period

<input type="text" value="300.66"/>

C. Full Name (Last, First, Middle Initial)

JOHN BURNS

Mailing Address 1501 VENTURA AVE

City State Zip Code
MIDLAND TX 79705

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.25816

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			13			2015			

Amount of Each Receipt this Period

<input type="text" value="46.86"/>

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 92 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

MICHAEL BURNSIDE

Mailing Address 2624 OAK DR

City State Zip Code
BAY CITY TX 77414

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.25884

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			02			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

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

SHERRY BURTON

Mailing Address 12693 N. 79TH ST

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF PROPERTY MGR.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.26040

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)

DR. AND MRS STEPHEN BUTLER

Mailing Address 517 DERRYDOWN RD

City State Zip Code
ORLANDO FL 32806

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.26198

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DWIGHT BUTLER Mailing Address 3030 SEA MARSH RD City AMELIA ISLAND State FL Zip Code 32034 FEC ID number of contributing federal political committee. C Name of Employer UNIVERSAL TECHNOLOGIES Occupation SALES Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Transaction ID : SA17A.26200 Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015 Amount of Each Receipt this Period 1000.00
--	--	--

B. Full Name (Last, First, Middle Initial) EVAN BUTLER Mailing Address 37 ADAMS AT # 2 City MELROSE State MA Zip Code 02176 FEC ID number of contributing federal political committee. C Name of Employer NATIONAL GRID Occupation UTILITY WORKER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 260.55		Transaction ID : SA17A.26202 Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2015 Amount of Each Receipt this Period 260.55
---	--	---

C. Full Name (Last, First, Middle Initial) TAZWELL BUTLER Mailing Address 410 CARDIGAN CIR. City LILBURN State GA Zip Code 30047 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Transaction ID : SA17A.26248 Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2015 Amount of Each Receipt this Period 250.00
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Subtotal Of Receipts This Page (optional)..... **1510.55**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)
 16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DANIELLE BUTTIGIEG		Transaction ID : SA17A.26290 Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>07</td><td></td><td>09</td><td></td><td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		09		2015
M M	/	D D	/	Y Y Y Y								
07		09		2015								
Mailing Address 156 QUARTZ MINE RD		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
City LAKE TOXAWAY	State NC	Zip Code 28747										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width:100%; text-align: right;"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												

B. Full Name (Last, First, Middle Initial) BERNARD BYRNE		Transaction ID : SA17A.26437 Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>09</td><td></td><td>24</td><td></td><td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		24		2015
M M	/	D D	/	Y Y Y Y								
09		24		2015								
Mailing Address 4929 W. 87TH ST. UNIT 1SE		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>100.00</td> </tr> </table>	100.00									
100.00												
City OAK LAWN	State IL	Zip Code 60453										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>300.00</td> </tr> </table>	300.00									
300.00												
Name of Employer SOUTHWEST AIRLINES	Occupation SUPERVISOR											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width:100%; text-align: right;"> <tr> <td>300.00</td> </tr> </table>	300.00									
300.00												

C. Full Name (Last, First, Middle Initial) KIM CAIN		Transaction ID : SA17A.26650 Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M M</td><td>/</td><td>D D</td><td>/</td><td>Y Y Y Y</td> </tr> <tr> <td>08</td><td></td><td>24</td><td></td><td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		24		2015
M M	/	D D	/	Y Y Y Y								
08		24		2015								
Mailing Address P.O. BOX 605		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>100.00</td> </tr> </table>	100.00									
100.00												
City SATSUMA	State AL	Zip Code 36572										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: right;"> <tr> <td>201.02</td> </tr> </table>	201.02									
201.02												
Name of Employer REMEIDLA SERVICES, INC.	Occupation CORP. SECRETARY											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width:100%; text-align: right;"> <tr> <td>201.02</td> </tr> </table>	201.02									
201.02												

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

700.00

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

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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

KIM CAIN

Mailing Address P.O. BOX 605

City	State	Zip Code
SATSUMA	AL	36572

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
REMEIDLA SERVICES, INC.	CORP. SECRETARY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.26651

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		24		2015

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

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

STEVEN CALABRESI

Mailing Address 104 PROSPECT STREET

City	State	Zip Code
PROVIDENCE	RI	02906

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NORTHWESTERN UNIVERSITY	PROFESSOR OF LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.26705

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

C. Full Name (Last, First, Middle Initial)

MARIO CALANDRELLO

Mailing Address 14 GILBERT PK

City	State	Zip Code
OSSINING	NY	10562

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.26719

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JASON CALL

Mailing Address 1012 LONG BEECHES AVENUE

City CHESAPEAKE State VA Zip Code 23320

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

Name of Employer Occupation
ECPI UNIVERSITY CPA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.26867

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
IRENE CAMARA

Mailing Address 10 AMERICAN LEGION HIGHWAY

City WESTPORT State MA Zip Code 02790

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 ▼
235.46

Transaction ID : SA17A.27018

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
62.48

C. Full Name (Last, First, Middle Initial)
IRENE CAMARA

Mailing Address 10 AMERICAN LEGION HIGHWAY

City WESTPORT State MA Zip Code 02790

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 ▼
267.13

Transaction ID : SA17A.27019

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period
31.67

Subtotal Of Receipts This Page (optional).....▶ **344.15**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 97 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT CAMMACK

Mailing Address 108 SIR CAMERON

City State Zip Code
LUMBERTON TX 77657

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ROBERT CAMMACK SELF EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.27095

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
LUZ CAMPA

Mailing Address 2345 FENNING AVE NE

City State Zip Code
BUFFALO MN 55313

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.27119

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BRANT CAMPANIAN

Mailing Address 2926 NW KENNEDY COURT

City State Zip Code
PORTLAND OR 97229

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GILEAD SCIENCES, INC. SENIOR MANAGER, NATIONAL ACCOUNTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.27152

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

SCHEDULE A-P
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 98 / 1212

(check only one)

<input type="checkbox"/>	16	<input checked="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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER CAMPBELL

Mailing Address 24990 TYLER PLACE

City	State	Zip Code
MURRIETA	CA	92562

FEC ID number of contributing federal political committee.

Name of Employer WALTER R ALLEN ARCHITECT	Occupation ARCHITECTURE
--	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 209.69

Transaction ID : SA17A.27176

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	209.69
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B. Full Name (Last, First, Middle Initial)
ROBERT CAMPBELL

Mailing Address PO BOX 6069

City	State	Zip Code
ROTTERDAM	NY	12306

FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17A.27303

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	1	5

Amount of Each Receipt this Period

<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	1000.00
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C. Full Name (Last, First, Middle Initial)
ROBERT CAMPBELL

Mailing Address PO BOX 6069

City	State	Zip Code
ROTTERDAM	NY	12306

FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Transaction ID : SA17A.27304

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	1	5

Amount of Each Receipt this Period

<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	1000.00
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Subtotal Of Receipts This Page (optional)..... 2209.69

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

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SUSAN CAMPBELL

Mailing Address 26 TURTLEBACK RD.
PO BOX 549

City: SUNAPEE State: NH Zip Code: 03782

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.27332

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
JEFFREY CAMPORA

Mailing Address 334 CEDAR BLUFF DRIVE

City: WINCHESTER State: TN Zip Code: 37398

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

Name of Employer: LIFE AID MEDICAL Occupation: OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.27380

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER CANIS

Mailing Address 23123 FAIRWAY BRIDGE

City: SAN ANTONIO State: TX Zip Code: 78258

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

Name of Employer: GLASIR MEDICAL Occupation: OWNER/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.27467

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			28			2015			

Amount of Each Receipt this Period

250.00

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

1000.00

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

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**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN PETER CANNON

Mailing Address **35 HIGHLAND BLVD**

City **LYNBROOK** State **NY** Zip Code **11563**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.27528

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SUE CANNON

Mailing Address **6420 W. LAKERIDGE RD**

City **LAKEWOOD** State **CO** Zip Code **80227**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.27551

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SUE CANNON

Mailing Address **6420 W. LAKERIDGE RD**

City **LAKEWOOD** State **CO** Zip Code **80227**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.27552

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			02			2015			

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **850.00**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WANDA CANNON

Mailing Address **2200 BOWMONT DRIVE**

City **BEVERLY HILLS** State **CA** Zip Code **90210**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.27555

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
NATHAN R CANO

Mailing Address **PO BOX 61574**

City **VANCOUVER** State **WA** Zip Code **98666**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.27565

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
LAWRENCE CAPISTA

Mailing Address **500 N LAKESHORE DR**
3114

City **CHICAGO** State **IL** Zip Code **60611**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.27675

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1010.55**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK CAPONETTE

Mailing Address **615 MYRA LN NW**

City State Zip Code
PORT CHARLOTTE FL 33948

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 : SA17A.27689

Date of Receipt
M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN CAPTAIN

Mailing Address **8028 SE STARK ST**

City State Zip Code
PORTLAND OR 97215

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

Name of Employer Occupation
PORTLAND TUB AND TAN RETAIL OWNER SPA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.27768

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

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
TODD CAPUTO

Mailing Address **7966 INDIAN HILL RD**

City State Zip Code
MANLIUS NY 13104

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

Name of Employer Occupation
SUN AUTO GROUP DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.27782

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **3950.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BELVA CARDIFF

Mailing Address 5402 FRANZ ROAD

City	State	Zip Code
KATY	TX	77493

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HALCYON INV	VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.27908

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
JEFFREY CARLSTEAD

Mailing Address 6404 LA JOLLA SCENIC DRIVE SOUTH

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HAMPTON INN	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.28146

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)
BARRY CARNES

Mailing Address 30 ARROWHEAD FARM RD

City	State	Zip Code
BOXFORD	MA	01921

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AB CARNES ROOFING INC	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.28225

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period

<input type="text" value="34.86"/>

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID CARNEY

Mailing Address 149 SYCAMORE RIDGE

City State Zip Code
MADISON MS 39110

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

Name of Employer Occupation
MARKOW WALKER ASSOCIATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.28233

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ALAN CARPENTER

Mailing Address 5409 TIERRA VISTA LANE

City State Zip Code
EL PASO TX 79932

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.28303

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

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CHRIS CARPENTER

Mailing Address 1538 SUNSET BLVD

City State Zip Code
WEST COLUMBIA SC 29169

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

Name of Employer Occupation
AFFORDABLE MEDICAL USA PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.28311

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

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANNIE CARRENO

Mailing Address 8775 SW 107 ST

City	State	Zip Code
MIAMI	FL	33176

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

Name of Employer	Occupation
DR. J.A. CARRENO	OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 229.19

Transaction ID : SA17A.28488

Date of Receipt

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

Amount of Each Receipt this Period
 _____ 108.21

B. Full Name (Last, First, Middle Initial)
BURTON CARROLL

Mailing Address 415 ROUTE 66

City	State	Zip Code
LIVINGSTON	TX	77351

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

Name of Employer	Occupation
DELTA CONSTRUCTORS	PROJECT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 221.69

Transaction ID : SA17A.28538

Date of Receipt

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

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
JOHN CARROLL

Mailing Address 10201 S. SEELEY AVE.

City	State	Zip Code
CHICAGO	IL	60643

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

Name of Employer	Occupation
TRG, INC.	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.28583

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 408.21

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RENEE CARROLL		Transaction ID : SA17A.28605 Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 10201 S. SEELEY AVE. City CHICAGO State IL Zip Code 60643		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ST. BARNABAS	Occupation TEACHER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) LARRY CARSON		Transaction ID : SA17A.28667 Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 5817 88TH ST City LUBBOCK State TX Zip Code 79424		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) JOHN J CARUSO		Transaction ID : SA17A.28905 Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 93 FLINT STREET City SOMERVILLE State MA Zip Code 02145		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.55
Name of Employer MIDDLESEX SHERIFFS DEP	Occupation ADMINISTRATIVE ASSISTANT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 260.55	

Subtotal Of Receipts This Page (optional).....	1010.55
Total This Period (last page this line number only).....	1010.55

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial)**JOHN J CARUSO**

Mailing Address 93 FLINT STREET

City	State	Zip Code
SOMERVILLE	MA	02145

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIDDLESEX SHERIFFS DEPOccupation
ADMINISTRATIVE ASSISTANT

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

521.10

Transaction ID : SA17A.28906

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			20			2015			

Amount of Each Receipt this Period

260.55

B. Full Name (Last, First, Middle Initial)**JOHN J CARUSO**

Mailing Address 93 FLINT STREET

City	State	Zip Code
SOMERVILLE	MA	02145

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIDDLESEX SHERIFFS DEPOccupation
ADMINISTRATIVE ASSISTANT

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

553.69

Transaction ID : SA17A.28907

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			20			2015			

Amount of Each Receipt this Period

32.59

C. Full Name (Last, First, Middle Initial)**JOHN J CARUSO**

Mailing Address 93 FLINT STREET

City	State	Zip Code
SOMERVILLE	MA	02145

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIDDLESEX SHERIFFS DEPOccupation
ADMINISTRATIVE ASSISTANT

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

563.69

Transaction ID : SA17A.28908

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			30			2015			

Amount of Each Receipt this Period

10.00

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

303.14

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHEN CARVELLI

Mailing Address 16625 FLYING JIB RD.

City State Zip Code
CORNELIUS NC 28031

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

Name of Employer Occupation
LOWE'S COMPANIES TECHNOLOGY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.28932

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY CASH

Mailing Address 6731 SW 45TH AVE

City State Zip Code
GAINESVILLE FL 32608

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

Name of Employer Occupation
VETERANS ADMINSTRATION PROGRAM ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
224.82

Transaction ID : SA17A.29089

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period
52.25

C. Full Name (Last, First, Middle Initial)
KEVIN CASTELLI

Mailing Address P.O. BOX 130

City State Zip Code
POWELL TX 75153

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

Name of Employer Occupation
SELF EMPLOYED CATTLE RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
455.51

Transaction ID : SA17A.29210

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2015

Amount of Each Receipt this Period
455.51

Subtotal Of Receipts This Page (optional)..... **757.76**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) HARRY CASTLE		Transaction ID : SA17A.29256																					
Mailing Address 1200 BELLE ALEE		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
07			31			2015																	
City LAKE CHARLES	State LA	Zip Code 70605																					
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		C																			
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Name of Employer SELF		Occupation DENTIST																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td> </tr> </table>																					250.00
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									250.00														

B. Full Name (Last, First, Middle Initial) DONALD CATHCART		Transaction ID : SA17A.29380																					
Mailing Address 150 SPRING LAKE HILLS DRIVE		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>08</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			08			2015			
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09			08			2015																	
City ALTAMONTE SPRINGS	State FL	Zip Code 32714																					
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		C																			
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Name of Employer RETIRED		Occupation RETIRED																					
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C. Full Name (Last, First, Middle Initial) CAROLE CATHEY		Transaction ID : SA17A.29386																					
Mailing Address P.O. BOX 886		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
07			31			2015																	
City KELLER	State TX	Zip Code 76244																					
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		C																			
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Name of Employer RETIRED		Occupation RETIRED																					
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Subtotal Of Receipts This Page (optional).....

									1000.00
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Total This Period (last page this line number only).....

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**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID CAVE

Mailing Address 33 FAMSIDE ST APT 103

City State Zip Code
WAYNESBORO VA 22980

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

Name of Employer Occupation
HERSHEY PRODUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.29503

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

Amount of Each Receipt this Period
260.55

B. Full Name (Last, First, Middle Initial)
NATALIE CAVINDER

Mailing Address 748 ADABELLE ROAD

City State Zip Code
REGISTER GA 30452

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 : SA17A.29517

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
AGATHA CAYIA

Mailing Address 3895 SE 20 ST

City State Zip Code
OCALA FL 34471

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

Name of Employer Occupation
SELF-EMP DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.29529

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 760.55

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

**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="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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) AGATHA CAYIA		Transaction ID : SA17A.29530	
Mailing Address 3895 SE 20 ST		Date of Receipt MM / DD / YYYY 08 / 24 / 2015	
City OCALA	State FL	Zip Code 34471	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 617.78	
Name of Employer SELF-EMP	Occupation DENTIST		
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 297.25	

B. Full Name (Last, First, Middle Initial) AGATHA CAYIA		Transaction ID : SA17A.29531	
Mailing Address 3895 SE 20 ST		Date of Receipt MM / DD / YYYY 09 / 26 / 2015	
City OCALA	State FL	Zip Code 34471	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMP	Occupation DENTIST		
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 797.25	

C. Full Name (Last, First, Middle Initial) AGATHA CAYIA		Transaction ID : SA17A.29532	
Mailing Address 3895 SE 20 ST		Date of Receipt MM / DD / YYYY 09 / 27 / 2015	
City OCALA	State FL	Zip Code 34471	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.53	
Name of Employer SELF-EMP	Occupation DENTIST		
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 867.78	

Subtotal Of Receipts This Page (optional)..... 617.78

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PHIL CEPARANO

Mailing Address **12 WEST OAK ST**

City **FARMINGDALE** State **NY** Zip Code **11735**

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

Name of Employer **PHIL CEPARANO PLUMBING & HEATING** Occupation **PLUMBER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
231.67

Transaction ID : SA17A.29652

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. ALFRED CERRONE

Mailing Address **PO BOX 3866**

City **SOUTH ATTLEBORO** State **MA** Zip Code **02703**

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

Name of Employer **CERRONE OLDSMOBILE** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.29692

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT CHAMBERLAIN

Mailing Address **1600 BROOK RUN DR.**

City **RALEIGH** State **NC** Zip Code **27614**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.29859

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1600.00**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHANIE CHANEY

Mailing Address 477 PENWOOD DR

City	State	Zip Code
EDGEWATER	MD	21037

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

Name of Employer	Occupation
LIVING HEALTH INTEGRATIVE MEDICINE	OWNER/DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.30057

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BERNARD CHANG

Mailing Address 7 SAINT MARYS ST

City	State	Zip Code
ANNAPOLIS	MD	21401

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

Name of Employer	Occupation
MERCY MEDICAL CENTER	SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.30061

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BETTYE CHAPLIN

Mailing Address 400 CORTE DEL BRISAS

City	State	Zip Code
MARATHON	FL	33050

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 ▼
500.00

Transaction ID : SA17A.30134

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

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER:
(check only one)

PAGE 114 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

ALICE CHAPMAN

Mailing Address 1680 N VINE ST

City	State	Zip Code
LOS ANGELES	CA	90028

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
TV PERSONALITY BAIL BONDSMAN / BOUN

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.30140

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

2700.00

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

JERRY CHAPMAN

Mailing Address 901 63RD STREET OCEAN W

City	State	Zip Code
MARATHON	FL	33050

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
REAL ESTATE DEVELOPMENT

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

275.88

Transaction ID : SA17A.30166

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

275.88

C. Full Name (Last, First, Middle Initial)

SUSAN CHAPMAN

Mailing Address 428 KINGSTON ST

City	State	Zip Code
CONWAY	SC	29526

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

213.62

Transaction ID : SA17A.30195

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period

213.62

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

3189.50

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SUSAN CHAPMAN

Mailing Address 428 KINGSTON ST

City State Zip Code
CONWAY SC 29526

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 ▼
713.62

Transaction ID : SA17A.30196

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
713.62

B. Full Name (Last, First, Middle Initial)
CINDY CHARATAN

Mailing Address 1111 RIVER ROAD G18

City State Zip Code
EDGEWATER NJ 07020

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 ▼
225.50

Transaction ID : SA17A.30246

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
225.50

C. Full Name (Last, First, Middle Initial)
HARRY CHATFIELD

Mailing Address 1645 LAKES PKWY - SUITE E

City State Zip Code
LAWRENCEVILLE GA 30043

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

Name of Employer Occupation
ATLANTA PRECISION SPINDLES, LLC SMALL BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.30388

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 975.50

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CATHERINE CHENG		Transaction ID : SA17A.30522	
Mailing Address 11 WEST WISTARIA AVE		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2015	
City ARCADIA	State CA	Zip Code 91007	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00	

B. Full Name (Last, First, Middle Initial) ANNA T CHERRY		Transaction ID : SA17A.30575	
Mailing Address 2222 WALTHAM ROAD		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2015	
City UPPER ARLINGTON	State OH	Zip Code 43221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 195.49	
Name of Employer NA	Occupation NA		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 258.27	

C. Full Name (Last, First, Middle Initial) JODI CHESTER		Transaction ID : SA17A.30623	
Mailing Address 557 CAROLINA OAKS AVENUE		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
City SMITHFIELD	State NC	Zip Code 27577	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 249.40	
Name of Employer GOLDEN CORRAL	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 249.40	

Subtotal Of Receipts This Page (optional)..... **3144.89**

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 / 1212								
<input type="checkbox"/>	16	<input checked="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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) BENJAMIN CHUNG		Transaction ID : SA17A.31155
Mailing Address 420 MCKINLEY		Date of Receipt
City CORONA State CA Zip Code 92879		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer SELF	Occupation HEALTH SCIENCE	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="300.00"/>	

B. Full Name (Last, First, Middle Initial) MARY CIAPCIAK		Transaction ID : SA17A.31198
Mailing Address 4 SAINT ANDREWS DRIVE		Date of Receipt
City SAINT LOUIS State MO Zip Code 63124		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="201.85"/>	

C. Full Name (Last, First, Middle Initial) DENNIS CLABAUGH		Transaction ID : SA17A.31423
Mailing Address 3825 EAST 1ST SOUTH		Date of Receipt
City KEARNEY State NE Zip Code 68847		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DENNIS CLARK

Mailing Address 4969 TYNE RIDGE CT

City State Zip Code
NASHVILLE TN 37220

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

Name of Employer Occupation
ELAN COSMETOLOGIST/BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.31572

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN CLARK

Mailing Address 1599 DERBY CR

City State Zip Code
NAPERVILLE IL 60563

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

Name of Employer Occupation
WIRTZ BEVERAGE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.31655

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
209.69

C. Full Name (Last, First, Middle Initial)
MATTHEW CLARK

Mailing Address 1813 TYLER LANE

City State Zip Code
LOUISVILLE KY 40205

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 : SA17A.31687

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 959.69

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MATTHEW CLARK

Mailing Address 1813 TYLER LANE

City State Zip Code
LOUISVILLE KY 40205

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 ▼
300.00

Transaction ID : SA17A.31688

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
DANIEL CLAS

Mailing Address 28W766 MAIN ST

City State Zip Code
WARRENVILLE IL 60555

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

Name of Employer Occupation
DC ENTERPRISE DRAINAGE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.77

Transaction ID : SA17A.31824

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
200.77

C. Full Name (Last, First, Middle Initial)
DR ASHLEY CLASSEN

Mailing Address PO BOX 2457

City State Zip Code
FT WORTH TX 76113

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

Name of Employer Occupation
TPMA HEALTH CARE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.31830

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 750.77

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DENA CLAVER

Mailing Address 9517 CR 419

City State Zip Code
GRANDVIEW TX 76050

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

Name of Employer Occupation
ITS A COWGIRL THING OWNE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
218.70

Transaction ID : SA17A.31858

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
107.97

B. Full Name (Last, First, Middle Initial)
HOWARD CLERF

Mailing Address 1232 92ND AVE. NE

City State Zip Code
LAKE STEVENS WA 98258

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

Name of Employer Occupation
BOEING TECHNICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.00

Transaction ID : SA17A.32037

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

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
HOWARD CLERF

Mailing Address 1232 92ND AVE. NE

City State Zip Code
LAKE STEVENS WA 98258

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

Name of Employer Occupation
BOEING TECHNICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
333.41

Transaction ID : SA17A.32038

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
98.41

Subtotal Of Receipts This Page (optional).....▶ 306.38

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) THOMAS CLIFTON Mailing Address 1910 CRESCENT PLACE City MIDLAND State TX Zip Code 79705 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer SELF EMPLOYED Occupation OIL & GAS INVESTMENTS Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		Transaction ID : SA17A.32097 Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
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B. Full Name (Last, First, Middle Initial) JULIA CLINE-SELLERS Mailing Address 5 WOODHILL CIRCLE City COLUMBIA State SC Zip Code 29209 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer N/A Occupation LAW Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>		Transaction ID : SA17A.32123 Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015 Amount of Each Receipt this Period <input type="text" value="1000.00"/>
--	--	---

C. Full Name (Last, First, Middle Initial) MIKE CLOPTON Mailing Address 2728 SW 25TH STREET City OKLAHOMA CITY State OK Zip Code 73108 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer SELF Occupation AUTO AUCTION OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="200.49"/>		Transaction ID : SA17A.32175 Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2015 Amount of Each Receipt this Period <input type="text" value="200.49"/>
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Subtotal Of Receipts This Page (optional).....

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RUTH COAN

Mailing Address **P.O. BOX 97**

City State Zip Code
GOODE VA 24556

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 ▼
204.79

Transaction ID : SA17A.32255

Date of Receipt
M M / D D / Y Y Y Y
08 18 2015

Amount of Each Receipt this Period
101.17

B. Full Name (Last, First, Middle Initial)
HL COATS

Mailing Address **312 TIOGA STREET**

City State Zip Code
BURLESON TX 76028

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 ▼
1000.00

Transaction ID : SA17A.32278

Date of Receipt
M M / D D / Y Y Y Y
08 09 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DAVID COHEN

Mailing Address **115 EAGLE ROCK ROAD**

City State Zip Code
STOUGHTON MA 02072

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

Name of Employer Occupation
SELF EMPLOYED ENERGY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
280.94

Transaction ID : SA17A.32573

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ **1301.17**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RONALD COHEN

Mailing Address **1135 HILLSBORO MILE**

City **HILLSBORO BEACH** State **FL** Zip Code **33062**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **2700.00**

Transaction ID : SA17A.149700

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
BILL COLE

Mailing Address **3035 MT. ZION RD.**

City **OXFORD** State **GA** Zip Code **30054**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.32708

Date of Receipt
 M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
FRANCIS COLE

Mailing Address **2260 GRAND AVENUE
UNIT 352**

City **BALDWIN** State **NY** Zip Code **11510**

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

Name of Employer **SPRINGS UFSD** Occupation **TEACHER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **221.59**

Transaction ID : SA17A.32742

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **3050.00**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JESSE COLE

Mailing Address 401 SOUTH ALABAMA ST STE 6B

City	State	Zip Code
BUTTE	MT	59701

FEC ID number of contributing federal political committee.

Name of Employer SELF	Occupation MD
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>

Transaction ID : SA17A.32760

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOHN COLE

Mailing Address 1033 TOP OF THE HILL RD

City	State	Zip Code
AKRON	OH	44333

FEC ID number of contributing federal political committee.

Name of Employer ROGERS INDUSTRIAL	Occupation PRESIDENT
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>

Transaction ID : SA17A.32764

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN COLE

Mailing Address 1033 TOP OF THE HILL RD

City	State	Zip Code
AKRON	OH	44333

FEC ID number of contributing federal political committee.

Name of Employer ROGERS INDUSTRIAL	Occupation PRESIDENT
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="335.33"/>

Transaction ID : SA17A.32765

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOHN COLE Mailing Address 1033 TOP OF THE HILL RD City AKRON State OH Zip Code 44333 FEC ID number of contributing federal political committee. C Name of Employer ROGERS INDUSTRIAL Occupation PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SA17A.32766 Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2015 Amount of Each Receipt this Period 63.49 Election Cycle-to-Date ▼ 398.82	
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B. Full Name (Last, First, Middle Initial) KATHRYN COLE Mailing Address 1852 TROTTERS LN City STONE MOUNTAIN State GA Zip Code 30087 FEC ID number of contributing federal political committee. C Name of Employer SELF Occupation CAR WASH OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SA17A.32774 Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015 Amount of Each Receipt this Period 250.00 Election Cycle-to-Date ▼ 250.00	
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C. Full Name (Last, First, Middle Initial) TOMMY COLE Mailing Address 50038 MOCCASIN CREEK DRIVE City AMORY State MS Zip Code 38821 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SA17A.32794 Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015 Amount of Each Receipt this Period 1000.00 Election Cycle-to-Date ▼ 1000.00	
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Subtotal Of Receipts This Page (optional).....▶ 1313.49

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HOWARD COLLIER

Mailing Address **581 JOLLY ROGERS RD**

City	State	Zip Code
ABILENE	TX	79601

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 ▼
1000.00

Transaction ID : SA17A.32960

Date of Receipt

08 / 06 / 2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
HOWARD COLLIER

Mailing Address **581 JOLLY ROGERS RD**

City	State	Zip Code
ABILENE	TX	79601

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 ▼
1100.00

Transaction ID : SA17A.32961

Date of Receipt

08 / 09 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
HOWARD COLLIER

Mailing Address **581 JOLLY ROGERS RD**

City	State	Zip Code
ABILENE	TX	79601

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 ▼
1350.00

Transaction ID : SA17A.32962

Date of Receipt

08 / 25 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 1350.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LEWIS G. COLLIER

Mailing Address 5040 CROSSVILLE HIWAY - PO BOX 629

City	State	Zip Code
SPARTA	TN	38583

FEC ID number of contributing federal political committee.

Name of Employer
CERTIFIED FOUNDATIONS, INC. (CFI)

Occupation
CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.32966

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
DAVE COLLINS

Mailing Address PSC 819 BOX 8331

City	State	Zip Code
FPO	AE	09645

FEC ID number of contributing federal political committee.

Name of Employer
UNITED STATES NAVY

Occupation
US NAVY ELECTRONICS TECHNICIAN
FIRST C

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.33028

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
DAVE COLLINS

Mailing Address PSC 819 BOX 8331

City	State	Zip Code
FPO	AE	09645

FEC ID number of contributing federal political committee.

Name of Employer
UNITED STATES NAVY

Occupation
US NAVY ELECTRONICS TECHNICIAN
FIRST C

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.33029

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JEFFREY COLLINS		Transaction ID : SA17A.33061																					
Mailing Address 19757 NE RED OAK BLVD.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>02</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			02			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			02			2015																	
City SAINT JOSEPH	State MO	Zip Code 64505																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																					
Name of Employer SOLAR ENERGY LLC		Occupation BUSSINESS OWNER																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																					
		Amount of Each Receipt this Period <input type="text" value="250.00"/>																					
B. Full Name (Last, First, Middle Initial) LYNDA Y COLLINS		Transaction ID : SA17A.33096																					
Mailing Address 1305 CATS EYE		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>10</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			10			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			10			2015																	
City HORSESHOE BAY	State TX	Zip Code 78657																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																					
Name of Employer RETIRED		Occupation RETIRED																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>																					
		Amount of Each Receipt this Period <input type="text" value="2700.00"/>																					
C. Full Name (Last, First, Middle Initial) NOEL COLLIS		Transaction ID : SA17A.33146																					
Mailing Address 136 GOLF VIEW DRIVE		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>09</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			09			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
07			09			2015																	
City ALBANY	State MN	Zip Code 56307																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																					
Name of Employer SELF		Occupation MD																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																					
		Amount of Each Receipt this Period <input type="text" value="250.00"/>																					

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFF COLVIN

Mailing Address **8440 VALMONT ROAD**

City State Zip Code
BOULDER CO 80301

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

Name of Employer Occupation
ACUSTREAM HEALTHCARE CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.33228

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
CHRIS COMBEST

Mailing Address **11413 MEADOW LN**

City State Zip Code
LEAWOOD KS 66211

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

Name of Employer Occupation
MS ELECTRONICS MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.33244

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
S.E. CONE

Mailing Address **P.O.BOX 10321**

City State Zip Code
LUBBOCK TX 79408

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

Name of Employer Occupation
SELF -EMPLOYED OIL INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.33402

Date of Receipt

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

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ **2250.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RANDALL CONNALLY Mailing Address 516 ANDALUSIAN TRAIL City State Zip Code CELINA TX 75009		Transaction ID : SA17A.33527 Date of Receipt M M / D D / Y Y Y Y 07 12 2015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer WCR VENTURES	Occupation CONSULTANT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) ADAM CONNER Mailing Address 1329 FLORIDA AVE NW City State Zip Code WASHINGTON DC 20009		Transaction ID : SA17A.33541 Date of Receipt M M / D D / Y Y Y Y 08 17 2015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 279.05
Name of Employer BRIGADE	Occupation VP POLITICS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 279.05	

C. Full Name (Last, First, Middle Initial) ADAM CONNER Mailing Address 1329 FLORIDA AVE NW City State Zip Code WASHINGTON DC 20009		Transaction ID : SA17A.33542 Date of Receipt M M / D D / Y Y Y Y 08 31 2015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 158.83
Name of Employer BRIGADE	Occupation VP POLITICS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 437.88	

Subtotal Of Receipts This Page (optional).....▶ 937.88

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN CONRAD

Mailing Address **8237 BERGEN PEAK TERRACE**

City **BOYNTON BEACH** State **FL** Zip Code **33473**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.33673

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BRIAN CONRAD

Mailing Address **8237 BERGEN PEAK TERRACE**

City **BOYNTON BEACH** State **FL** Zip Code **33473**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
345.13

Transaction ID : SA17A.33674

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
95.13

C. Full Name (Last, First, Middle Initial)
ROBERTO CONTI

Mailing Address **941 PINTAIL CT**

City **COPPELL** State **TX** Zip Code **75019**

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

Name of Employer **CONTI GOURMET COFFEE** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.57

Transaction ID : SA17A.33748

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
210.57

Subtotal Of Receipts This Page (optional)..... **555.70**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC CONTRERAS

Mailing Address 2130 S. 12TH ST.
APT# 347

City BISMARCK State ND Zip Code 58504

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

Name of Employer Occupation
RAILROAD SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.22

Transaction ID : SA17A.33761

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
234.22

B. Full Name (Last, First, Middle Initial)
ROBERTO CONTRERAS

Mailing Address 6418 HARBOR MIST

City MISSOURI CITY State TX Zip Code 77459

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

Name of Employer Occupation
REPSA LLC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.33772

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CURTIS CONVERSE

Mailing Address 32110 TAMINA

City MAGNOLIA State TX Zip Code 77354

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

Name of Employer Occupation
SELF MECHANIC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
215.51

Transaction ID : SA17A.33776

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
215.51

Subtotal Of Receipts This Page (optional).....▶ 699.73

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CRAIG COOK

Mailing Address **905 WEST COMMERCIAL**

City **OZARK** State **AR** Zip Code **72949**

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

Name of Employer **SELF** Occupation **PLAINTIFFS ATTORNEY CATASTROPHIC PE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.33861

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

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DANNY COOK

Mailing Address **PO DRAWER 636**

City **TEXARKANA** State **TX** Zip Code **75504**

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

Name of Employer **COOK LAW OFFICES, PC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **232.75**

Transaction ID : SA17A.33864

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
132.75

C. Full Name (Last, First, Middle Initial)
THAINE COOK JT

Mailing Address **PO BOX 1358**

City **HUMBLE** State **TX** Zip Code **77347**

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

Name of Employer **SELF** Occupation **ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.33978

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **632.75**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES COOLEY

Mailing Address 902A MS DR

City State Zip Code
WAYNESBORO MS 39367

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

Name of Employer Occupation
SELF EMPLOYED RESTAURATEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.34016

Date of Receipt

08 / 07 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
RICHARD COPELY

Mailing Address 5109 THE OAKS CIRCLE

City State Zip Code
ORLANDO FL 32809

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

Name of Employer Occupation
COPELY EYE CLINIC OPTOMETRIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.34237

Date of Receipt

08 / 01 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
RUSSELL CORA

Mailing Address 2404 RIDGEWAY

City State Zip Code
EVANSTON IL 60201

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
270.77

Transaction ID : SA17A.34277

Date of Receipt

08 / 24 / 2015

Amount of Each Receipt this Period

270.77

Subtotal Of Receipts This Page (optional)..... **770.77**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL CORATOLO		Transaction ID : SA17A.34290	
Mailing Address 18 N.CENTRAL AVENUE SUITE 204		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015	
City HARTSDALE	State NY	Zip Code 10530	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 368.50	
Name of Employer SELF	Occupation REAL ESTATE	Election Cycle-to-Date 368.50	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) EDWARD CORCORAN		Transaction ID : SA17A.34346	
Mailing Address 11544 GLEN OAK CT		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015	
City ESTERO	State FL	Zip Code 33928	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer E & R	Occupation CONSULTANT	Election Cycle-to-Date 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) RUFO CORONA		Transaction ID : SA17A.34526	
Mailing Address 10022 AMBER FIELD ST		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2015	
City LAS VEGAS	State NV	Zip Code 89178	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 160.84	
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE	Election Cycle-to-Date 298.16	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional)..... **1529.34**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KEVIN COTTLE

Mailing Address **159 GLEN ORCHARD WAY**

City **DANIELS** State **WV** Zip Code **25832-9010**

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

Name of Employer **KALITTA AIR** Occupation **AIRLINE CAPTAIN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.34811

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
DAN COURY

Mailing Address **9602 W BUCKLE RD**

City **TOLLISON** State **AZ** Zip Code **85353**

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

Name of Employer **MESA COLD STORAGE LMT** Occupation **LOGISTICS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.34982

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ALICIA COVINGTON

Mailing Address **9128 N. WOODLAWN DR.**

City **FRESNO** State **CA** Zip Code **93720**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.35052

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional)..... **2100.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JENNIFER COVINGTON		Transaction ID : SA17A.35054 Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015	
Mailing Address 9322 WALTERVILLE ROAD City HOUSTON State TX Zip Code 77080		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer HUSBAND Occupation WIFE		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

B. Full Name (Last, First, Middle Initial) REGINA COWEN		Transaction ID : SA17A.35099 Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2015	
Mailing Address 1815 OAKWOOD DRIVE EAST City PEARLAND State TX Zip Code 77581		Amount of Each Receipt this Period 364.21	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 364.21	
Name of Employer SELF EMPLOYEES Occupation AGENT		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

C. Full Name (Last, First, Middle Initial) BILLY S COX JR		Transaction ID : SA17A.35133 Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015	
Mailing Address 15551 FM 362 City NAVASOTA State TX Zip Code 77868		Amount of Each Receipt this Period 310.55	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 310.55	
Name of Employer BILLY COX GROUP Occupation CONSTITUTIONAL CONSERVATIVE		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Subtotal Of Receipts This Page (optional)..... 924.76

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFFREY COX

Mailing Address **230 W. BERKSHIRE CIRCLE**

City LONGWOOD	State FL	Zip Code 32779
-------------------------	--------------------	--------------------------

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

Name of Employer QUALITY MANUFACTURING SERVICES INC.	Occupation CEO
--	--------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.35180

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			23			2015			

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
SUZANNE COYLE

Mailing Address **3051 PERCH DRIVE**

City RIVA	State MD	Zip Code 21140
---------------------	--------------------	--------------------------

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

Name of Employer BOOKKEEPING BY SUZANNE	Occupation BOOKKEEPER
---	---------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
216.45

Transaction ID : SA17A.35289

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

105.04

C. Full Name (Last, First, Middle Initial)
REBECCA CRAIG

Mailing Address **PO BOX 159**

City SUMNER	State WA	Zip Code 98390
-----------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation SALEMAN
--	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.35411

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ **1605.04**

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LYNN CRANNELL

Mailing Address **10740 CROOKED STICK LANE**

City **CARMEL** State **IN** Zip Code **46032**

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

Name of Employer **LACY AND LACY** Occupation **INTERIOR DESIGN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.35509

Date of Receipt
 M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY CRAVEN

Mailing Address **327 OAK HILL LANE**

City **CANTON** State **GA** Zip Code **30115**

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

Name of Employer **GOODWIN WRIGHT** Occupation **ACCOUNT REPRESENTATIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.35540

Date of Receipt
 M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
TIMOTHY CRAVEN

Mailing Address **327 OAK HILL LANE**

City **CANTON** State **GA** Zip Code **30115**

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

Name of Employer **GOODWIN WRIGHT** Occupation **ACCOUNT REPRESENTATIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 337.90

Transaction ID : SA17A.35541

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
 87.90

Subtotal Of Receipts This Page (optional).....▶ **587.90**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 141 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL CRAWFORD

Mailing Address **4705 PALMETTO**

City **BENTON** State **LA** Zip Code **71006**

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

Name of Employer **SELF** Occupation **DENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.35599

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
TERRENCE CRENSHAW

Mailing Address **555 HAHAIONE STREET
10D**

City **HONOLULU** State **HI** Zip Code **96825**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.35709

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
JACK CRIVELLO II

Mailing Address **3404 KELLOGG WAY**

City **SAN DIEGO** State **CA** Zip Code **92106**

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

Name of Employer **CRIVELLO CORPORATION** Occupation **INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.35849

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period

2700.00

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

3200.00

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

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KATHLEEN CRONIN

Mailing Address **BOX 356**

City State Zip Code
MONUMENT BEACH MA 02553

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

Name of Employer Occupation
OCB OPHTHALMOLOGY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.35933

Date of Receipt
M M / D D / Y Y Y Y
09 16 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DAVID CROW

Mailing Address **4010 RAVENSWAY CT.**

City State Zip Code
PEARLAND TX 77584

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 : SA17A.36101

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DAVID CROW

Mailing Address **4010 RAVENSWAY CT.**

City State Zip Code
PEARLAND TX 77584

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 ▼
500.00

Transaction ID : SA17A.36102

Date of Receipt
M M / D D / Y Y Y Y
08 05 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1000.00**

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

SCHEDULE A-P
ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EDWARD CROWE

Transaction ID : **SA17A.36137**

Mailing Address 607 49TH AVE W

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

City	State	Zip Code
BRADENTON	FL	34207

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

250.00

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

B. Full Name (Last, First, Middle Initial)
RICK CRUICKSHANK

Transaction ID : **SA17A.36206**

Mailing Address 5944 AIRPORT RD

Date of Receipt

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

City	State	Zip Code
SEDALIA	CO	80135

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

1000.00

Name of Employer
C&R IND

Occupation
SALES

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

C. Full Name (Last, First, Middle Initial)
NILSA CRUZ

Transaction ID : **SA17A.36283**

Mailing Address 3748 W ASHLEY LN

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

5400.00

Name of Employer
MRC

Occupation
PRACTICE ADMINISTRATOR

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

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

6650.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NILSA CRUZ

Mailing Address 3748 W ASHLEY LN

City State Zip Code
MEQUON WI 53092

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

Name of Employer Occupation
MRC PRACTICE ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149686

Date of Receipt

/ /

Redesignate:

Amount of Each Receipt this Period

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
NILSA CRUZ

Mailing Address 3748 W ASHLEY LN

City State Zip Code
MEQUON WI 53092

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

Name of Employer Occupation
MRC PRACTICE ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149687

Date of Receipt

/ /

Redesignate: GENERAL 2016

Amount of Each Receipt this Period

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. KEVIN M CRYAN

Mailing Address 18 ROUND ST

City State Zip Code
REHOBOTH MA 02769

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

Name of Employer Occupation
CRYAN LANDSCAPE CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36300

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTY CUGINI

Mailing Address 1913 ISLA DE PALMA CIRCLE

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MILLENIUM	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36356

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GEORGE CUMA

Mailing Address 2404 CLAIRE CT.

City	State	Zip Code
MICHIGAN CITY	IN	46360

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36434

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BOB CUMMINS

Mailing Address 10456 150 WEST

City	State	Zip Code
OVERLAND PK	KS	66221

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	RENTAL PROPERTYS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36489

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

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

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID CUNDIFF

Mailing Address 1778 SOUTH HAWTHORNE LANE

City	State	Zip Code
INDIANAPOLIS	IN	46203

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UPS FRIGHT	DRIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36498

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ANN CUNNINGHAM

Mailing Address 31831 SUNSET AVENUE

City	State	Zip Code
LAGUNA BEACH	CA	92651

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36510

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH A CUNNINGHAM

Mailing Address 72 ROSEMARY RD

City	State	Zip Code
DEDHAM	MA	02026

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.36536

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JACK CURTIS

Mailing Address 134 APPLEHEAD ISLAND DRIVE

City State Zip Code
HORSSHOE BAY TX 79066

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 : SA17A.36730

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOSHUA CURTIS

Mailing Address 358 SOUTH SERVICE RD

City State Zip Code
CENTER MORICHES NY 11934

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

Name of Employer Occupation
SELF EMPLOYED CONSTRUCTION/FACILITY MAINTENANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.36738

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LEONARD AND CAROL CURTIS

Mailing Address 3104 VILLAGE LANE

City State Zip Code
ROSWELL GA 30075

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 : SA17A.36744

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN CUTLER

Mailing Address 5655 OAKWOOD CIR

City State Zip Code
LONG GROVE IL 60047

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 : SA17A.36863

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARVIN DACE

Mailing Address 18315 W CLOVER LN

City State Zip Code
ALVIN TX 77511

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

Name of Employer Occupation
SELF SHEET METAL WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.37080

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PHILIP DAMIANO

Mailing Address 1719 E FINCH RD

City State Zip Code
HAYDEN LAKE ID 83835

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

Name of Employer Occupation
NW WASTE AND RECYCLING,LLC BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.37405

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1250.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PHILIP DAMIANO

Mailing Address 1719 E FINCH RD

City State Zip Code
HAYDEN LAKE ID 83835

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

Name of Employer Occupation
NW WASTE AND RECYCLING,LLC BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.37406

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARTIN DAMM

Mailing Address 7111 OLD HOLLAND RD

City State Zip Code
SAGINAW MI 48601

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

Name of Employer Occupation
US PIPELINE WELDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.37418

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
HENRY DATELLE

Mailing Address 4270 OLDE MILL LANE

City State Zip Code
ATLANTA GA 30342

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 ▼
1000.00

Transaction ID : SA17A.37839

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 2000.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TODD DAUTERMAN

Mailing Address 5008 SPANISH RIVERT TRAIL

City State Zip Code
FORT WORTH TX 76137

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

Name of Employer Occupation
MILKACRON SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.37888

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
GALE DAVID

Mailing Address 5317 WILDWOOD DRIVE
N/A

City State Zip Code
FLOWER MOUND TX 75028

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 : SA17A.37969

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JUDY DAVID

Mailing Address 5200 KELLER SPRINGS RD.
#1024

City State Zip Code
DALLAS TX 75248

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 : SA17A.37973

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

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAUL DAVIES

Mailing Address **50 SOUTH POINTE DRIVE**
1003

City **MIAMI BEACH** State **FL** Zip Code **33139**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.38070

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STEPHEN DAVINO

Mailing Address **12 SADDLE WAY**

City **WALPOLE** State **MA** Zip Code **02081**

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

Name of Employer **PLATING FOR ELECTRONICS,INC** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.38078

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CORBETT DAVIS JR

Mailing Address **1450 TROPICAL FLAMINGO LN**

City **GULF BREEZAE** State **FL** Zip Code **32563**

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

Name of Employer **JEWELERS TRADE INC** Occupation **RETAIL BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.38164

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional) **1500.00**

Total This Period (last page this line number only) **1500.00**

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CORBETT DAVIS JR		Transaction ID : SA17A.38165	
Mailing Address 1450 TROPICAL FLAMINGO LN		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2015	
City GULF BREEZAE	State FL	Zip Code 32563	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 158.83	
Name of Employer JEWELERS TRADE INC	Occupation RETAIL BUSINESS OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 658.83	

B. Full Name (Last, First, Middle Initial) HOWARD DAVIS		Transaction ID : SA17A.38271	
Mailing Address 1420 LA PERLA AVE.		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015	
City LONG BEACH	State CA	Zip Code 90815	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer UNIVERSAL CARE	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) JACK DAVIS		Transaction ID : SA17A.38273	
Mailing Address 519 SO19AVE		Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2015	
City POCATELLO	State ID	Zip Code 83201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

Subtotal Of Receipts This Page (optional).....	1408.83
Total This Period (last page this line number only).....	1408.83

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) PATRICIA DAVIS		Transaction ID : SA17A.38435	
Mailing Address P.O.B. 784		Date of Receipt	
City MARSHALL State CA Zip Code 94940		MM / DD / YYYY 07 / 27 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer SELF-EMPLOYED	Occupation NURSE	250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) RANDY DAVIS		Transaction ID : SA17A.38463	
Mailing Address 9400 ALMOND		Date of Receipt	
City ALTA LOMA State CA Zip Code 91737		MM / DD / YYYY 08 / 04 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer DAVIS DELVELOPMENT	Occupation CONTRACTOR	1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) RICHARD DAVIS		Transaction ID : SA17A.38478	
Mailing Address 9711 TIMBER TRAIL		Date of Receipt	
City SCURRY State TX Zip Code 75158		MM / DD / YYYY 08 / 08 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer QUAD GRAPHICS	Occupation SALES	250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD DAVIS

Mailing Address 9711 TIMBER TRAIL

City State Zip Code
SCURRY TX 75158

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

Name of Employer Occupation
QUAD GRAPHICS SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
304.54

Transaction ID : SA17A.38479

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
54.54

B. Full Name (Last, First, Middle Initial)
JACK DAVITO

Mailing Address 4434 GEARHART ROAD APT 2703

City State Zip Code
TALLAHASSEE FL 32303

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 : SA17A.38576

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES E DAWSON

Mailing Address 15395 30TH ST SE

City State Zip Code
WHEATLAND ND 58079

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 ▼
500.00

Transaction ID : SA17A.38617

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

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 804.54

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES E DAWSON

Mailing Address 15395 30TH ST SE

City State Zip Code
WHEATLAND ND 58079

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 ▼
658.83

Transaction ID : SA17A.38618

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
158.83

B. Full Name (Last, First, Middle Initial)
KENNETH DAWSON

Mailing Address 6048 DALHOUSIE DR

City State Zip Code
CAPE GIRARDEAU MO 63701

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

Name of Employer Occupation
SELF AGRICULTURE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.38634

Date of Receipt
M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD DAWSON

Mailing Address 3750 W. RIVER DR.

City State Zip Code
DAVENPORT IA 52802

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

Name of Employer Occupation
GLASS DOORS AND MORE ESTIMATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.38644

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
209.69

Subtotal Of Receipts This Page (optional).....▶ 868.52

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) SHARON DAY		Transaction ID : SA17A.38717	
Mailing Address 4041 TIERRA VISTA DR		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
City LAKE HAVASU CITY	State AZ	Zip Code 86406	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ Amount of Each Receipt this Period 106.63		
		292.52	

B. Full Name (Last, First, Middle Initial) LEONARD DEAL		Transaction ID : SA17A.38862	
Mailing Address 2910 WEST 35TH AVENUE		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015	
City ANCHORAGE	State AK	Zip Code 99517	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ Amount of Each Receipt this Period 500.00		
		500.00	

C. Full Name (Last, First, Middle Initial) TAYLOR DEAN		Transaction ID : SA17A.38954	
Mailing Address 173 E. PORTER RUN DR		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2015	
City COLLIERVILLE	State TN	Zip Code 38017-7702	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ Amount of Each Receipt this Period 103.41		
		204.72	

Subtotal Of Receipts This Page (optional).....	710.04
Total This Period (last page this line number only).....	710.04

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSEPH DE ANGELIS

Mailing Address **244 ROLLING MEADOWS BLVD. NO.**

City	State	Zip Code
OCEAN	NJ	07712

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

Name of Employer	Occupation
SHORE FUNDONG LTD.COM	EQUIPMENT FINANCE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period: **500.00**

Transaction ID : SA17A.38741

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
 Amount of Each Receipt this Period: **500.00**

B. Full Name (Last, First, Middle Initial)
MATTHEW DEBLOCK

Mailing Address **400 NORTH CORONADO STREET
APT 2118**

City	State	Zip Code
CHANDLER	AZ	85224

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

Name of Employer	Occupation
GUTHY	ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period: **221.03**

Transaction ID : SA17A.39049

Date of Receipt

M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
 Amount of Each Receipt this Period: **103.95**

C. Full Name (Last, First, Middle Initial)
MATTHEW DEBLOCK

Mailing Address **400 NORTH CORONADO STREET
APT 2118**

City	State	Zip Code
CHANDLER	AZ	85224

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

Name of Employer	Occupation
GUTHY	ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period: **341.06**

Transaction ID : SA17A.39050

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
 Amount of Each Receipt this Period: **120.03**

Subtotal Of Receipts This Page (optional)..... **723.98**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MATTHEW DEBLOCK

Mailing Address **400 NORTH CORONADO STREET
APT 2118**

City State Zip Code
CHANDLER AZ 85224

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

Name of Employer Occupation
GUTHY ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
530.54

Transaction ID : SA17A.39051

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period
189.48

B. Full Name (Last, First, Middle Initial)
DEBORAH DECICCO

Mailing Address **5420 W BARNES RD
318**

City State Zip Code
SPOKANE WA 99208

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 : SA17A.39141

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

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GARY DECKER

Mailing Address **3350 W 126TH STREET**

City State Zip Code
BLUE ISLAND IL 60406

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
215.94

Transaction ID : SA17A.39162

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
107.97

Subtotal Of Receipts This Page (optional).....▶ **547.45**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GARY DECKER

Mailing Address 3350 W 126TH STREET

City State Zip Code
BLUE ISLAND IL 60406

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
323.91

Transaction ID : SA17A.39169

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
107.97

B. Full Name (Last, First, Middle Initial)
APRIL DECLLOUD

Mailing Address 22880 N HIWASSEE RD

City State Zip Code
ARCADIA OK 73007

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 ▼
249.32

Transaction ID : SA17A.39198

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER DECLLOUD

Mailing Address 22880 N HIWASSEE RD

City State Zip Code
ARCADIA OK 73007

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

Name of Employer Occupation
REDBRANCH SECURITY SECURITY CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
245.69

Transaction ID : SA17A.39202

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
100.25

Subtotal Of Receipts This Page (optional).....▶ 308.22

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CHRISTOPHER DECLLOUD		Transaction ID : SA17A.39203	
Mailing Address 22880 N HIWASSEE RD		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2015	
City ARCADIA	State OK	Zip Code 73007	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer REDBRANCH SECURITY	Occupation SECURITY CONSULTANT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 345.69	

B. Full Name (Last, First, Middle Initial) ANTHONY DECOTIS		Transaction ID : SA17A.39216	
Mailing Address 9 WOODBURY LANE		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015	
City MIDDLETON	State MA	Zip Code 01949	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 209.69	
Name of Employer TOWN LINE LUXURY LANES	Occupation SELF		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 209.69	

C. Full Name (Last, First, Middle Initial) SARAH L DEERING		Transaction ID : SA17A.39266	
Mailing Address 300 CANARY CT		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2015	
City ENON	State OH	Zip Code 45323	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 412.84	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 412.84	

Subtotal Of Receipts This Page (optional).....▶ 722.53

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DELBERT DEES

Mailing Address **2857 CAMBRIDGE DRIVE**

City State Zip Code
SAN JOSE CA 95125

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 ▼
1000.00

Transaction ID : SA17A.39284

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DAVID DEESE

Mailing Address **4224 METRIC DRIVE**

City State Zip Code
WINTER PARK FL 32792

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

Name of Employer Occupation
QUINCO ELECTRICAL SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
454.07

Transaction ID : SA17A.39292

Date of Receipt
M M / D D / Y Y Y Y
08 19 2015

Amount of Each Receipt this Period
454.07

C. Full Name (Last, First, Middle Initial)
PENNY DEFRANCO

Mailing Address **240 CHUBB AVE
428**

City State Zip Code
LYNDHURST NJ 07071

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

Name of Employer Occupation
SOUTH MOUNTAIN NEPHROLOGY NEPHROLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.17

Transaction ID : SA17A.39341

Date of Receipt
M M / D D / Y Y Y Y
08 09 2015

Amount of Each Receipt this Period
200.17

Subtotal Of Receipts This Page (optional).....▶ **1654.24**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PENNY DEFRANCO

Mailing Address **240 CHUBB AVE
428**

City **LYNDHURST** State **NJ** Zip Code **07071**

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

Name of Employer **SOUTH MOUNTAIN NEPHROLOGY** Occupation **NEPHROLOGIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
329.20

Transaction ID : SA17A.39342

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
129.03

B. Full Name (Last, First, Middle Initial)
PADDY DEIGHAN

Mailing Address **2700 LAS VEGAS BLVD S
UNIT 3108**

City **LAS VEGAS** State **NV** Zip Code **89109**

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

Name of Employer **ASTON MCLAREN INC. / SELF** Occupation **ATTORNEY / SCIENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.39441

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KAREL DEJONG

Mailing Address **3987 N 3600 E**

City **KIMBERLY** State **ID** Zip Code **83341**

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

Name of Employer **SELF EMPLOYED** Occupation **BOVINE PODIATRY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.39477

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **629.03**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KAREL DEJONG

Mailing Address 3987 N 3600 E

City State Zip Code
KIMBERLY ID 83341

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

Name of Employer Occupation
SELF EMPLOYED BOVINE PODIATRY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
361.35

Transaction ID : SA17A.39478

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
11.35

B. Full Name (Last, First, Middle Initial)
JON DELANGIS

Mailing Address 1195 TEMPLE HILLS DR.

City State Zip Code
LAGUNA BEACH CA 92651

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

Name of Employer Occupation
YURPAL, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
236.67

Transaction ID : SA17A.39571

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JAY DELAPLAIN

Mailing Address 9 PECK ST

City State Zip Code
REHOBOTH MA 02769

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.39579

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
400.00

Subtotal Of Receipts This Page (optional).....▶ 511.35

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHNNY BILL DELASHAW

Mailing Address 14229 228TH AVE SE

City ISSAQUAH State WA Zip Code 98027

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

Name of Employer JOHNNY DELASHAW Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.39588

Date of Receipt

07 / 05 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ROBERT DELINE

Mailing Address 7950 E. PRENTICE AVE
SUITE 11

City GREENWOOD VILLAGE State CO Zip Code 80220

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

Name of Employer MONAGHAN FARMS INC. Occupation FARMER/RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
310.55

Transaction ID : SA17A.39691

Date of Receipt

09 / 21 / 2015

Amount of Each Receipt this Period

310.55

C. Full Name (Last, First, Middle Initial)
NEAL DELOYE

Mailing Address 24310 MOULTON PARKWAY O-182

City LAGUNA HILLS State CA Zip Code 92637

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.39773

Date of Receipt

08 / 04 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **810.55**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DIANE DELUCIA

Mailing Address 1023 NANDINA STREET

City State Zip Code
HARTSVILLE SC 29550

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

Name of Employer Occupation
EXCELSIOR CORPORATE SER IT TRAINER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.61

Transaction ID : SA17A.39813

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
RICHARD T. DELUCIA

Mailing Address 11 SUNNY ACRES ROAD

City State Zip Code
BETHEL CT 06801

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

Name of Employer Occupation
SELF EMPLOYED INDEPENDENT CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.39817

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES DEMARCO

Mailing Address 12 GRANT WOOD WAY

City State Zip Code
MARLTON NJ 08053

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

Name of Employer Occupation
INS SOLUTIONS INC EXEC. VICE PRES.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.39842

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)		PAGE 166 / 1212			
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAUL DEPIETRO

Mailing Address **70 GREY FOX LANE**

City **STRATFORD** State **CT** Zip Code **06614**

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

Name of Employer **SELF** Occupation **CPA**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.40206

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JARED DE SANTIS

Mailing Address **541 LINCOLN AVENUE**

City **RIDGEFIELD** State **NJ** Zip Code **07657**

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

Name of Employer **SELF-EMPLOYED** Occupation **BUILDING MEASURING/PRESENTATION**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.38832

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

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
R TAMARA DE SILVA

Mailing Address **3240 N LAKE SHORE DRIVE
APT 6C**

City **CHICAGO** State **IL** Zip Code **60657**

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

Name of Employer **LAW OFFICES OF R TAMARA DE SILVA** Occupation **LAWYER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **276.80**

Transaction ID : SA17A.38835

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period
107.97

Subtotal Of Receipts This Page (optional)..... **607.97**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LISA DESMOND

Mailing Address 1000 VENETIAN WAY, APT. 901

City	State	Zip Code
MIAMI	FL	33139

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 517.36

Transaction ID : SA17A.40415

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period

_____ 462.18

B. Full Name (Last, First, Middle Initial)
LISA DESMOND

Mailing Address 1000 VENETIAN WAY, APT. 901

City	State	Zip Code
MIAMI	FL	33139

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 974.30

Transaction ID : SA17A.40416

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

_____ 456.94

C. Full Name (Last, First, Middle Initial)
JAMES DEWHURST

Mailing Address 350 CALLE LA MESA

City	State	Zip Code
MORAGA	CA	94556

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.40667

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

_____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1419.12

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HARLAND DEWITT

Mailing Address 10297 SW VISCONTI WAY

City State Zip Code
PORT ST LUCIE FL 34986

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 ▼
209.15

Transaction ID : SA17A.40685

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
TRESCOTT DEWITT

Mailing Address 17 LAKEVIEW RD

City State Zip Code
ESSEX MA 01929

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.40689

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES DICKEY

Mailing Address 343 BUTTERFIELD ROAD

City State Zip Code
SAN ANSELMO CA 94960

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

Name of Employer Occupation
ZINC SALES DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
322.01

Transaction ID : SA17A.40917

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
123.53

Subtotal Of Receipts This Page (optional).....▶ 648.53

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES DICKEY

Mailing Address **343 BUTTERFIELD ROAD**

City State Zip Code
SAN ANSELMO CA 94960

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

Name of Employer Occupation
ZINC SALES DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
498.36

Transaction ID : SA17A.40918

Date of Receipt
M M / D D / Y Y Y Y
08 22 2015

Amount of Each Receipt this Period
176.35

B. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.41022

Date of Receipt
M M / D D / Y Y Y Y
07 04 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.41023

Date of Receipt
M M / D D / Y Y Y Y
07 27 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **376.35**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) STEVEN DIEHL Mailing Address POB 163		Transaction ID : SA17A.41024 Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015
City MARTINSBURG State PA Zip Code 16662	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 400.00	
Name of Employer CSR Occupation PHYSICIAN	Election Cycle-to-Date ▼ _____ 400.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) STEVEN DIEHL Mailing Address POB 163		Transaction ID : SA17A.41025 Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2015
City MARTINSBURG State PA Zip Code 16662	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 500.00	
Name of Employer CSR Occupation PHYSICIAN	Election Cycle-to-Date ▼ _____ 500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) STEVEN DIEHL Mailing Address POB 163		Transaction ID : SA17A.41026 Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2015
City MARTINSBURG State PA Zip Code 16662	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 550.00	
Name of Employer CSR Occupation PHYSICIAN	Election Cycle-to-Date ▼ _____ 550.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Subtotal Of Receipts This Page (optional).....▶ _____ 200.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
582.10

Transaction ID : SA17A.41027

Date of Receipt
M M / D D / Y Y Y Y
08 11 2015

Amount of Each Receipt this Period
32.10

B. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
632.10

Transaction ID : SA17A.41028

Date of Receipt
M M / D D / Y Y Y Y
08 13 2015

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
682.10

Transaction ID : SA17A.41029

Date of Receipt
M M / D D / Y Y Y Y
08 15 2015

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional)..... **132.10**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
707.10

Transaction ID : SA17A.41030

Date of Receipt
M M / D D / Y Y Y Y
09 01 2015

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
STEVEN DIEHL

Mailing Address **POB 163**

City State Zip Code
MARTINSBURG PA 16662

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

Name of Employer Occupation
CSR PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
732.10

Transaction ID : SA17A.41031

Date of Receipt
M M / D D / Y Y Y Y
09 20 2015

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JACK DILL

Mailing Address **2120 E DEVON COURT**

City State Zip Code
MARTINSVILLE IN 46151

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

Name of Employer Occupation
INDIAN JEWELERS SUPPLY PRESIDENT/CEO/CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.41176

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **300.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JASEN DILL

Mailing Address 16331 TIMBER MEADOW DR

City State Zip Code
COLORADO SPRINGS CO 80908

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

Name of Employer Occupation
SELF MULTI BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.41180

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DARLENE DILLEY

Mailing Address 139 AMMANN RD

City State Zip Code
SAN ANTONIO TX 78015

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

Name of Employer Occupation
DILLEY ALLERGY ADMINISTRATOR.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.41205

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LOUIS DILUIGI

Mailing Address 41 POPE'S LANE

City State Zip Code
DANVERS MA 01923

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

Name of Employer Occupation
DILUIGI INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.41276

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 174 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE DIRKS

Mailing Address 710 COLE RANCH RD.

City State Zip Code
ENCINITAS CA 92024

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VIASAT, INC. TREASURER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.41461

Date of Receipt
 / /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BRUCE DIRKS

Mailing Address 710 COLE RANCH RD.

City State Zip Code
ENCINITAS CA 92024

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VIASAT, INC. TREASURER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.41462

Date of Receipt
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
KARL DIX

Mailing Address 1379 EDMUND COURT

City State Zip Code
ATLANTA GA 30306

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.41534

Date of Receipt
 / /

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DR LINDA DIXON

Mailing Address **741 N KALAHEO AVE**

City **KAILUA** State **HI** Zip Code **96734**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.41552

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
MS. WINFRED S DODGE

Mailing Address **37 WOODWARD PT**

City **BRUNSWICK** State **ME** Zip Code **04011**

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

Name of Employer **BILL DODGE** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.41738

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
JOHN DOMBROWSKI

Mailing Address **5123 WATSON ST NW**

City **WASHINGTON** State **DC** Zip Code **20016-5341**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.41944

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....▶ **3500.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFF DONER

Mailing Address **311 WEST FIRST AVENUE**

City **COLUMBUS** State **OH** Zip Code **43201**

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

Name of Employer **AKITA,LTD.** Occupation **RESEARCH SCIENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.26

Transaction ID : SA17A.42084

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
205.26

B. Full Name (Last, First, Middle Initial)
JEFF DONER

Mailing Address **311 WEST FIRST AVENUE**

City **COLUMBUS** State **OH** Zip Code **43201**

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

Name of Employer **AKITA,LTD.** Occupation **RESEARCH SCIENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
398.62

Transaction ID : SA17A.42085

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
193.36

C. Full Name (Last, First, Middle Initial)
JEFF DONER

Mailing Address **311 WEST FIRST AVENUE**

City **COLUMBUS** State **OH** Zip Code **43201**

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

Name of Employer **AKITA,LTD.** Occupation **RESEARCH SCIENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
591.98

Transaction ID : SA17A.42097

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
193.36

Subtotal Of Receipts This Page (optional)..... **591.98**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE DONNELLY

Mailing Address 23790 N HILLFARM RD

City	State	Zip Code
LAKE BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.42117

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR J DOOLEY

Mailing Address 75 RIDGE RD

City	State	Zip Code
FOXBORO	MA	02035

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.42250

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
STEVE DOOLIN

Mailing Address 1401 REBEL RIDGE RD

City	State	Zip Code
LAGRANGE	KY	40031

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FAGAN CONSULTING	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.42276

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN DORAN

Mailing Address 87 CHICKASAW TRL.

City State Zip Code
JEFFERSON GA 30549

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

Name of Employer Occupation
ISTAFF IT RECUITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.42292

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period
250.00

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

Mailing Address 4309 HUNTING TRAIL

City State Zip Code
LAKE WORTH FL 33467

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

Name of Employer Occupation
HILLERS ELECTRICAL ENGINEERING, INC. ELECTRICAL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
207.28

Transaction ID : SA17A.42302

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
26.82

C. Full Name (Last, First, Middle Initial)
STEPHEN DORN

Mailing Address 20488 S REDLAND RD

City State Zip Code
OREGON CITY OR 97045

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

Name of Employer Occupation
ERECTORS, INC. SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.42352

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 526.82

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JUDITH DOUGLAS

Mailing Address **2607 WESTERN AVE #1204**

City	State	Zip Code
SEATTLE	WA	98121

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 : SA17A.42535

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ALBERT DOWLING

Mailing Address **1942 LANE AVENUE S.**

City	State	Zip Code
JACKSONVILLE	FL	32210

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

Name of Employer	Occupation
SELF	PLUMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.42635

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
DENISE DOYLE

Mailing Address **3900 HEADWATER CT**

City	State	Zip Code
RALEIGH	NC	27606

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

Name of Employer	Occupation
BARRY'S CAFE	OWNER/MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.42727

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **750.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS DOZIER

Mailing Address 1559 BROAD STREET

City State Zip Code
AUGUSTA GA 30904

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

Name of Employer Occupation
GOLD MECH CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.42782

Date of Receipt

08 / **07** / **2015**

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
KRISTEN DRAKE

Mailing Address 885 SCHOLZ DRIVE

City State Zip Code
VANDALIA OH 45377

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

Name of Employer Occupation
HIGH TECH ELASTOMERS OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
514.23

Transaction ID : SA17A.42826

Date of Receipt

08 / **11** / **2015**

Amount of Each Receipt this Period

514.23

C. Full Name (Last, First, Middle Initial)
KRISTEN DRAKE

Mailing Address 885 SCHOLZ DRIVE

City State Zip Code
VANDALIA OH 45377

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

Name of Employer Occupation
HIGH TECH ELASTOMERS OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
647.83

Transaction ID : SA17A.42827

Date of Receipt

08 / **11** / **2015**

Amount of Each Receipt this Period

133.60

Subtotal Of Receipts This Page (optional)..... **897.83**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KAREN & DAVID DRAPER

Mailing Address 16630 COLES CROSSING DR.

City State Zip Code
CYPRESS TX 77429

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.42851

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DR. GAIL DREYER

Mailing Address 184 HIVIEW TERRACE

City State Zip Code
WEST SENECA NY 14224

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.42932

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
KRISTIN DRUEY

Mailing Address 8179 BRADFORD WAY

City State Zip Code
PARKLAND FL 33076

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.43054

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

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

BARBARA & THOMAS DUFFY

Mailing Address **3452 ASTURIUS COURT**

City	State	Zip Code
SPARKS	NV	89436

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.43271

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

L. JEAN DUNEGAN

Mailing Address **5065 MORET CT**

City	State	Zip Code
BRIGHTON	MI	48116

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.43503

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)

MS. ELAINE M DUNHAM

Mailing Address **7 RIVERSIDE DR**

City	State	Zip Code
MARBLEHEAD	MA	01945

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.43521

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN A DUNSTAN

Mailing Address 551 SAINT MARKS AVENUE

City WESTFIELD State NJ Zip Code 07090

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

Name of Employer Occupation
THIRD POINT LLC ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
219.57

Transaction ID : SA17A.43694

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
219.57

B. Full Name (Last, First, Middle Initial)
DANNY DURHAM

Mailing Address 3509 PRESTON TRAIL

City AUGUSTA State GA Zip Code 30907

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

Name of Employer Occupation
DURHAM LAW FIRM, P.C. LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.43837

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

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JULIE DUTTON

Mailing Address 1 PENELL RD.

City SWANTON State VT Zip Code 05488

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

Name of Employer Occupation
US BORDER PATROL BORDER PATROL AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.43940

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 719.57

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CYNTHIA DYDAK

Mailing Address 157 TYLER AVE

City State Zip Code
CARTERET NJ 07008

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

Name of Employer Occupation
SETON TOWING AMERICAN CITIZEN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
274.26

Transaction ID : SA17A.44036

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
274.26

B. Full Name (Last, First, Middle Initial)
DAVID DYE

Mailing Address 817 REVERE WAY E

City State Zip Code
BARTLESVILLE OK 74006

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

Name of Employer Occupation
CHINOWTH & COHEN REALTORS SALES & LEASING AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
244.90

Transaction ID : SA17A.44050

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DAVID DYE

Mailing Address 817 REVERE WAY E

City State Zip Code
BARTLESVILLE OK 74006

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

Name of Employer Occupation
CHINOWTH & COHEN REALTORS SALES & LEASING AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
274.90

Transaction ID : SA17A.44051

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
30.00

Subtotal Of Receipts This Page (optional).....▶ 404.26

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) PHILIP EASTMAN			Transaction ID : SA17A.44271		
Mailing Address P.O. BOX 97			Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2015		
City FLOWERY BRANCH	State GA	Zip Code 30542	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00		
Name of Employer RETIRED	Occupation RETIRED		Amount of Each Receipt this Period 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) MR. THEODORE P EATON			Transaction ID : SA17A.44305		
Mailing Address 11A VICKSBURG PL			Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015		
City NEWPORT	State RI	Zip Code 02840	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 400.00		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		Amount of Each Receipt this Period 400.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) MICHAEL EBERT			Transaction ID : SA17A.44364		
Mailing Address PO BOX 1808			Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015		
City MURRELLS INLET	State SC	Zip Code 29576	Amount of Each Receipt this Period 83.03		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 83.03		
Name of Employer RETIRED	Occupation RETIRED		Amount of Each Receipt this Period 83.03		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 283.03		

Subtotal Of Receipts This Page (optional) 1483.03

Total This Period (last page this line number only)

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL EBERT

Mailing Address PO BOX 1808

City MURRELLS INLET State SC Zip Code 29576

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
314.70

Transaction ID : SA17A.44365

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
31.67

B. Full Name (Last, First, Middle Initial)
MICHAEL EBERT

Mailing Address PO BOX 1808

City MURRELLS INLET State SC Zip Code 29576

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
331.16

Transaction ID : SA17A.44366

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
16.46

C. Full Name (Last, First, Middle Initial)
SANDRA EBSEN

Mailing Address 304 S PEACH ST

City MEDFORD State OR Zip Code 97501

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

Name of Employer PACIFIC COAST SPECIALTIES Occupation SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.44383

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 298.13

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) <table border="0"> <tr> <td><input type="checkbox"/> 16</td> <td><input checked="" type="checkbox"/> 17a</td> <td><input type="checkbox"/> 17b</td> <td><input type="checkbox"/> 17c</td> <td><input type="checkbox"/> 17d</td> <td><input type="checkbox"/> 18</td> </tr> <tr> <td><input type="checkbox"/> 19a</td> <td><input type="checkbox"/> 19b</td> <td><input type="checkbox"/> 20a</td> <td><input type="checkbox"/> 20b</td> <td><input type="checkbox"/> 20c</td> <td><input type="checkbox"/> 21</td> </tr> </table>	<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	PAGE 187 / 1212
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) HENNY ECKLAR Mailing Address 161 HARPSTONE LN City: SIMI VALLEY State: CA Zip Code: 93065 FEC ID number of contributing federal political committee. C Name of Employer: KAVLICO Occupation: SR. MECHANICAL DESIGNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SA17A.44462 Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;">M M /</td> <td style="width: 33%;">D D /</td> <td style="width: 33%;">Y Y Y Y</td> </tr> <tr> <td>07</td> <td>14</td> <td>2015</td> </tr> </table> Amount of Each Receipt this Period 2700.00	M M /	D D /	Y Y Y Y	07	14	2015
M M /	D D /	Y Y Y Y					
07	14	2015					
Election Cycle-to-Date ▼ 2700.00							

B. Full Name (Last, First, Middle Initial) BRIAN EDMONSTON Mailing Address 13460 OLD WINERY RD City: POWAY State: CA Zip Code: 92064 FEC ID number of contributing federal political committee. C Name of Employer: ICODING Occupation: MANAGER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SA17A.44577 Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;">M M /</td> <td style="width: 33%;">D D /</td> <td style="width: 33%;">Y Y Y Y</td> </tr> <tr> <td>09</td> <td>29</td> <td>2015</td> </tr> </table> Amount of Each Receipt this Period 25.00	M M /	D D /	Y Y Y Y	09	29	2015
M M /	D D /	Y Y Y Y					
09	29	2015					
Election Cycle-to-Date ▼ 225.00							

C. Full Name (Last, First, Middle Initial) JAN EDWARDS Mailing Address 18845 12TH AVE N City: PLYMOUTH State: MN Zip Code: 55447 FEC ID number of contributing federal political committee. C Name of Employer: EDCO PRODUCTS, INC. Occupation: OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SA17A.44640 Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;">M M /</td> <td style="width: 33%;">D D /</td> <td style="width: 33%;">Y Y Y Y</td> </tr> <tr> <td>08</td> <td>07</td> <td>2015</td> </tr> </table> Amount of Each Receipt this Period 1000.00	M M /	D D /	Y Y Y Y	08	07	2015
M M /	D D /	Y Y Y Y					
08	07	2015					
Election Cycle-to-Date ▼ 1000.00							

Subtotal Of Receipts This Page (optional).....3725.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD EDWARDS

Mailing Address 110 CHERRY ALLEY

City State Zip Code
STEVENS PA 17578

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

Name of Employer Occupation
EDWARDS ELECTRIC & TELECOM INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.44695

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
RICHARD M EGAN

Mailing Address 61 SANDERS LANE

City State Zip Code
WALTHAM MA 02451

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

Name of Employer Occupation
RAYTHEON FINAL INSP.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
282.86

Transaction ID : SA17A.44769

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
156.67

C. Full Name (Last, First, Middle Initial)
KEN EICHLER

Mailing Address 8250 TUCKER RD

City State Zip Code
AMITY OR 97101

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

Name of Employer Occupation
EICHLER FARMS INC FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.44915

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 3106.67

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRANDON EIDSON

Mailing Address 2624 E ROBINWOOD DR

City State Zip Code
LAKE CHARLES LA 70611

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

Name of Employer Occupation
SUDDENLINK MEDIA ADVERTISING ACCOUNT EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.44938

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BERNARD EISENFELD

Mailing Address 3988 E MORNING DOVE TRL.

City State Zip Code
PHOENIX AZ 85050

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

Name of Employer Occupation
GRAYHAWK RADIOLOGY, LTD. RADIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.44978

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LANEITA EL-ARAB

Mailing Address 1701 CEDAR COVE CIR

City State Zip Code
CEDAR HILL TX 75104

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

Name of Employer Occupation
SAMTEX JANITORIAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45013

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BEVERLY B ELLIOTT

Mailing Address P.O. BOX 1477

City	State	Zip Code
MOUNT JULIET	TN	37121

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 ▼
 5400.00

Transaction ID : SA17A.45197

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
COL BRUCE ELLIOTT

Mailing Address 229 VALLETTE STREET

City	State	Zip Code
NEW ORLEANS	LA	70114

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 ▼
 500.00

Transaction ID : SA17A.45209

Date of Receipt

M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
JIM ELLIOTT

Mailing Address 7715 MAJESTIC PALM DRIVE

City	State	Zip Code
BOYNTON BEACH	FL	33437

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 : SA17A.45227

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 3450.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE ELLIS

Mailing Address 2121 ALBATROSS WAY

City SPARKS State NV Zip Code 89441

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.45282

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

350.00			
--------	--	--	--

B. Full Name (Last, First, Middle Initial)
ROBERT ELLIS

Mailing Address 6877 W FRYE RD

City CHANDLER State AZ Zip Code 85226

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

Name of Employer AVAIR Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.45358

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

2700.00			
---------	--	--	--

C. Full Name (Last, First, Middle Initial)
ROBERT ELLIS

Mailing Address 6877 W FRYE RD

City CHANDLER State AZ Zip Code 85226

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

Name of Employer AVAIR Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2757.10

Transaction ID : SA17A.45359

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

57.10			
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Subtotal Of Receipts This Page (optional).....▶ **3107.10**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HARRY ELWARDT

Mailing Address 1804 PRINCETON CIRCLE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Occupation
SELF OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45462

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MOHAMED ELYOUSSOUFI

Mailing Address 3735 GRANBURY DRIVE

City State Zip Code
DALLAS TX 75287

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

Name of Employer Occupation
GEORGE'S CROWN AUTOMOTIVE,LLC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.45482

Date of Receipt
M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
STEVE EMMERT

Mailing Address 20720 EDGEWOOD CIR.

City State Zip Code
CASTRO VALLEY CA 94552

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

Name of Employer Occupation
PACIFIC POWER TESTING INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45600

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 760.55

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STU EMMERT

Mailing Address 6036 E. SAGE DR.

City State Zip Code
PARADISE VALLEY AZ 85253

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 : SA17A.45602

Date of Receipt
MM / DD / YYYY
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ERIC ENGEL

Mailing Address 908 W. KINGBIRD DR.

City State Zip Code
CHANDLER AZ 85286

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

Name of Employer Occupation
EAST VALLEY ORAL SURGERY ORAL SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45687

Date of Receipt
MM / DD / YYYY
07 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
THOMAS ENNIS

Mailing Address 2911 OCEAN FRONT WALK

City State Zip Code
VENICE CA 90291

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

Name of Employer Occupation
NS CORP CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45802

Date of Receipt
MM / DD / YYYY
08 / 08 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALLAN ENRIQUEZ

Mailing Address 1452 S. ELLSWORTH RD. SP. 1181

City MESA State AZ Zip Code 85209

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

Name of Employer ANE SALES AND MARKETING Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.45827

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CALVIN ERICKSON

Mailing Address 1519 SILVERLAKE DR

City NORCROSS State GA Zip Code 30093

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

Name of Employer SELF Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.45940

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KIRK ERICKSON

Mailing Address 9820 E. THOMPSON PEAK PARKWAY
UNIT #821

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
565.94

Transaction ID : SA17A.45959

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
565.94

Subtotal Of Receipts This Page (optional).....▶ 915.94

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOHN ERIKSON		Transaction ID : SA17A.45979	
Mailing Address 219 AVE G		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2015	
City REDONDO BEACH	State CA	Zip Code 90277	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 248.82	
Name of Employer MATTHEWS RETAIL ADVISORS	Occupation SALES	Election Cycle-to-Date 248.82	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) JOHN ERIKSON		Transaction ID : SA17A.45980	
Mailing Address 219 AVE G		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015	
City REDONDO BEACH	State CA	Zip Code 90277	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 36.67	
Name of Employer MATTHEWS RETAIL ADVISORS	Occupation SALES	Election Cycle-to-Date 285.49	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) BOBBY ETRI		Transaction ID : SA17A.46299	
Mailing Address 15 WILLIAM ST APT 41B		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2015	
City NEW YORK	State NY	Zip Code 10005	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 260.55	
Name of Employer PVM OIL	Occupation OIL BROKER	Election Cycle-to-Date 260.55	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ 546.04

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JUSTIN EVANS		Transaction ID : SA17A.46445																					
Mailing Address 108 FOX HILL DR		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>05</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			05			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			05			2015																	
City BLYTHEWOOD	State SC	Zip Code 29016																					
FEC ID number of contributing federal political committee.	C																						
Name of Employer SAS INSTITUTE	Occupation ACCOUNT EXECUTIVE																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 510.94																						
		Amount of Each Receipt this Period 510.94																					

B. Full Name (Last, First, Middle Initial) JOSEPH EVERETT		Transaction ID : SA17A.46550																					
Mailing Address 81 WEST CENTRAL STREET		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>27</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			27			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			27			2015																	
City NATICK	State MA	Zip Code 01760																					
FEC ID number of contributing federal political committee.	C																						
Name of Employer JOHN EVERETT AND SONS	Occupation MANAGER																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 234.21																						
		Amount of Each Receipt this Period 234.21																					

C. Full Name (Last, First, Middle Initial) JOSEPH EVERETT		Transaction ID : SA17A.46551																					
Mailing Address 81 WEST CENTRAL STREET		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>05</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			05			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
09			05			2015																	
City NATICK	State MA	Zip Code 01760																					
FEC ID number of contributing federal political committee.	C																						
Name of Employer JOHN EVERETT AND SONS	Occupation MANAGER																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 556.75																						
		Amount of Each Receipt this Period 322.54																					

Subtotal Of Receipts This Page (optional).....▶ **1067.69**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL EVERS

Mailing Address 12058 THORNHILL COURT

City State Zip Code
LAKEWOOD RANCH FL 34202

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

Name of Employer Occupation
PROJECT CURE ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.46598

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL EVERS

Mailing Address 12058 THORNHILL COURT

City State Zip Code
LAKEWOOD RANCH FL 34202

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

Name of Employer Occupation
PROJECT CURE ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
327.68

Transaction ID : SA17A.46599

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
77.68

C. Full Name (Last, First, Middle Initial)
HARRY AND JOANNE FAHNESTOCK

Mailing Address PO BOX 20065

City State Zip Code
RENO NV 89515

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 ▼
1000.00

Transaction ID : SA17A.46801

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1327.68

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) TOM FALBO		Transaction ID : SA17A.46850	
Mailing Address 102 5TH AVE		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2015	
City MONTGOMERY	State WV	Zip Code 25136	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.55	
Name of Employer A THOMAS FALBO	Occupation PRIVATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 260.55		

B. Full Name (Last, First, Middle Initial) CHERYL FALCHI		Transaction ID : SA17A.46852	
Mailing Address 60 TOYON LANE		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015	
City SAUSALITO	State CA	Zip Code 94965	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) ED FALLON		Transaction ID : SA17A.46912	
Mailing Address 164 MOUNTAIN DRIVE		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2015	
City GILFORD	State NH	Zip Code 03249	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer COMPLYA	Occupation ANALYST		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Subtotal Of Receipts This Page (optional).....▶ **760.55**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANK FAMULARE

Mailing Address 2200 CR 129

City State Zip Code
TAYLOR TX 76574

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 ▼
500.00

Transaction ID : SA17A.46957

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
JAMES FANTIN

Mailing Address 7676 JASMINE COURT

City State Zip Code
WEST PALM BEACH FL 33412

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

Name of Employer Occupation
JAMES FANTIN PA REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.46995

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
BONNIE FARBER

Mailing Address 210 GOLF COURSE ROAD

City State Zip Code
OWINGS MILLS MD 21117

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 ▼
500.00

Transaction ID : SA17A.47011

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CAROL FEDAK		Transaction ID : SA17A.47514											
Mailing Address 8205 BOCA RIO DR		Date of Receipt											
City BOCA RATON State FL Zip Code 33433		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		03		2015
M M	/	D D	/	Y Y Y Y									
08		03		2015									
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period											
Name of Employer RETIRED Occupation RETIRED		<table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>		1000.00									
1000.00													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼											
		<table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table>		1000.00									
1000.00													

B. Full Name (Last, First, Middle Initial) FRED FEDDERSEN		Transaction ID : SA17A.47518											
Mailing Address 1101 MAIN STREET UNIT 11		Date of Receipt											
City LOUDON State TN Zip Code 37774		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		05		2015
M M	/	D D	/	Y Y Y Y									
09		05		2015									
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period											
Name of Employer FJ FEDDERSEN INC. Occupation PRESIDENT		<table border="1"> <tr> <td colspan="5">2700.00</td> </tr> </table>		2700.00									
2700.00													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼											
		<table border="1"> <tr> <td colspan="5">2700.00</td> </tr> </table>		2700.00									
2700.00													

C. Full Name (Last, First, Middle Initial) HOWARD FEINSTEIN		Transaction ID : SA17A.47605											
Mailing Address 80 FOXHUNT CRESCENT		Date of Receipt											
City OYSTER BAY COVE State NY Zip Code 11791		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2015
M M	/	D D	/	Y Y Y Y									
09		30		2015									
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period											
Name of Employer FEINSTEIN IRON WORKS Occupation SELF		<table border="1"> <tr> <td colspan="5">130.66</td> </tr> </table>		130.66									
130.66													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼											
		<table border="1"> <tr> <td colspan="5">284.45</td> </tr> </table>		284.45									
284.45													

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

3830.66

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

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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRIS FELAND

Mailing Address 1128 WESTRAC DR S
SUITE B

City State Zip Code
FARGO ND 58103

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.47623

Date of Receipt
 / /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DAVID FENDER

Mailing Address 2230 GRANDE AV. # 100

City State Zip Code
TYLER TX 75703

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF OIL & GAS EXPLORATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.47740

Date of Receipt
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
HUNTER FENWICK

Mailing Address 11420 HOSPAH

City State Zip Code
HELOTES TX 78023

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RAE SECURITY SECURITY INTEGRATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.47796

Date of Receipt
 / /

Amount of Each Receipt this Period

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES B FERGUSON

Mailing Address **835 N YALE AVE**

City VILLA PARK	State IL	Zip Code 60181
---------------------------	--------------------	--------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
--	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.47851

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
PRISCILLA FERGUSON

Mailing Address **17111 SHEFFIELD PARK DR**

City CYPRESS	State TX	Zip Code 77433
------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.47872

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM FERRARY

Mailing Address **18707 ARCARO GLEN CT**

City HUMBLE	State TX	Zip Code 77346
-----------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
258.83

Transaction ID : SA17A.48043

Date of Receipt

M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period

158.83

Subtotal Of Receipts This Page (optional).....▶ **1158.83**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM FERRARY

Mailing Address 18707 ARCARO GLEN CT

City State Zip Code
HUMBLE TX 77346

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 ▼
315.93

Transaction ID : SA17A.48044

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
57.10

B. Full Name (Last, First, Middle Initial)
MARC FERRELL

Mailing Address 7323 ARROWOOD ROAD

City State Zip Code
BETHESDA MD 20817

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

Name of Employer Occupation
TWENTY FOUR HOSPITALITY GROUP CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.48080

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
TIM FERRIS

Mailing Address 154 HAVILAH DR

City State Zip Code
BOSTIC NC 28018

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

Name of Employer Occupation
DEFIANT MARINE DEEP SEA COMMERCIAL DIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
248.50

Transaction ID : SA17A.48114

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
248.50

Subtotal Of Receipts This Page (optional).....▶ 555.60

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANK FERTITTA

Mailing Address P.O. BOX 379045

City State Zip Code
LAS VEGAS NV 89137

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

Name of Employer Occupation
FRANK FERTITTA STUDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.48138

Date of Receipt

09 / 08 / 2015

Amount of Each Receipt this Period

260.55

B. Full Name (Last, First, Middle Initial)
MR. JOHN M FERTOLITO

Mailing Address 1135 HILLSBORO MILE

City State Zip Code
HILLSBORO BEACH FL 33062

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.48140

Date of Receipt

07 / 29 / 2015

Amount of Each Receipt this Period

5400.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN M FERTOLITO

Mailing Address 1135 HILLSBORO MILE

City State Zip Code
HILLSBORO BEACH FL 33062

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149698

Date of Receipt

07 / 29 / 2015

Redesignate: TO GENERAL 2016

Amount of Each Receipt this Period

-2700.00

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... **5660.55**

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

MR. JOHN M FERTOLITO

Mailing Address 1135 HILLSBORO MILE

City HillsBORO BEACH State FL Zip Code 33062

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149699

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Redesignate: FROM PRIMARY 2016

Amount of Each Receipt this Period

2700.00

[MEMO ITEM]

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

MARK FIDLER

Mailing Address 232 MILL ROAD

City BERNVILLE State PA Zip Code 19506

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 ▼
262.79

Transaction ID : SA17A.48247

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

262.79

C. Full Name (Last, First, Middle Initial)

PAUL FIGUEIREDO

Mailing Address 381 WANOOSNOC RD

City FITCHBURG State MA Zip Code 01420

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

Name of Employer Occupation
A-ALERT OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.48370

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 512.79

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)			PAGE 207 / 1212		
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSEPH FILIPKOWSKI

Mailing Address 510 LAKE SHORE DR
28

City LAKE PARK State FL Zip Code 33403

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.48404

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ERIC FINDLAY

Mailing Address 7310 WHITEFOREST COVE

City TYLER State TX Zip Code 75703

FEC ID number of contributing federal political committee.

Name of Employer FINDLAYCRAFT, PC Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.48482

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL DAVID FINE

Mailing Address 12891 OSPREY ST

City CORONA State CA Zip Code 92880

FEC ID number of contributing federal political committee.

Name of Employer LEE & ASSOCIATES Occupation GROUP MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.48501

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROCKY FISHER

Mailing Address 9038 NORTH POINT DR

City State Zip Code
BEACH CITY TX 77523

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

Name of Employer Occupation
KDR SUPPLY INC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.48825

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JOHN FLANAGAN

Mailing Address 1879 JIM SIMMONS

City State Zip Code
FLAGSTAFF AZ 86005

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 : SA17A.49090

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SAMUEL FLEEMAN

Mailing Address 2103 MONTICELLO DR

City State Zip Code
GASTONIA NC 28056

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 ▼
260.55

Transaction ID : SA17A.49166

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Receipt this Period
260.55

Subtotal Of Receipts This Page (optional).....▶ 3210.55

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN FLORIO

Mailing Address **670 BARK DRIVE**

City **WALNUTPORT** State **PA** Zip Code **18088**

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

Name of Employer **JAFLO INC** Occupation **ARBORIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.49407

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JACK FLOWERS

Mailing Address **1910 W. 16TH ST.**

City **LONG BEACH** State **CA** Zip Code **90813**

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

Name of Employer **CUNICO CORP.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.49431

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
JACK FLOWERS

Mailing Address **1910 W. 16TH ST.**

City **LONG BEACH** State **CA** Zip Code **90813**

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

Name of Employer **CUNICO CORP.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1260.55

Transaction ID : SA17A.49432

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1510.55**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TIMOTHY FLYNN

Mailing Address **6 CARRIAGE PINES CT**

City	State	Zip Code
THE WOODLANDS	TX	77381

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TANNER RESOURCES	MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.49517

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
TONY FLYNN

Mailing Address **1450 SOUTH LUTHER ROAD**

City	State	Zip Code
CHOCTAW	OK	73020

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LILA INTERNATIONAL	DRILLING ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.49519

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. LOWELL J FOCKLER

Mailing Address **26325 CANNIES CIR**

City	State	Zip Code
MISSION VIEJO	CA	92692

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.49531

Date of Receipt
M M / D D / Y Y Y Y
 / /

Amount of Each Receipt this Period

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

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FREDERICK FOGELMAN

Mailing Address **156 SUMMERS STREET**

City **OYSTER BAY** State **NY** Zip Code **11771**

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

Name of Employer **AIRFLEX INDUSTRIAL INC.** Occupation **MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.49556

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
AMIR FOOLADI

Mailing Address **23929 MEADOW CREEK DRIVE**

City **ROBERTSDALE** State **AL** Zip Code **36567**

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

Name of Employer **PARSCO,LLC** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.49714

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
THOMAS FORCE

Mailing Address **5 BRYANS COURT**

City **WEST ISLIP** State **NY** Zip Code **11795**

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

Name of Employer **THE PATRIOT GROUP** Occupation **PRESIDENT AND ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 213.74

Transaction ID : SA17A.49765

Date of Receipt
 M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
 113.74

Subtotal Of Receipts This Page (optional)..... 613.74

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 212 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARIO FORGIONE

Mailing Address 3139 LEEWARD LANE

City State Zip Code
NAPLES FL 34103

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.49873

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

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ANTHONY FORLINI

Mailing Address 6 MAIN ST

City State Zip Code
OCEANPORT NJ 07757

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AFORCE, INC HEAD HUNCHO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.49883

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

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DOROTHY FOSTER

Mailing Address 1124 NANTUCKET DR.

City State Zip Code
HOUSTON TX 77057

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50098

Date of Receipt
M M / D D / Y Y Y Y
07 / 04 / 2015

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 213 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial)**ETTA FOSTER****Transaction ID : SA17A.50102**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Mailing Address 815 BLACKJACK RD W

City	State	Zip Code
AUBREY	TX	76227

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)**WILLIAM FOSTER****Transaction ID : SA17A.50163**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			06			2015			

Mailing Address 389 SO. LAKE DR.
4C

City	State	Zip Code
PALM BEACH	FL	33480

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)**ROBERT FOUQUETTE****Transaction ID : SA17A.50210**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Mailing Address BOX 605

City	State	Zip Code
E FREETOWN	MA	02717

FEC ID number of contributing
federal political committee.**C**Name of Employer
FREETOWN POLICE D.P.Occupation
P.O

Receipt For: 2016

 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Amount of Each Receipt this Period

1000.00

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

1350.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANTHONY FOUTZ

Mailing Address 45 MEADOWS RD

City	State	Zip Code
RICHMOND HILL	GA	31324

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FOUTZ CONSTRUCTION	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50235

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RANDY FOWLER

Mailing Address 1660 CHURCH STREET SE

City	State	Zip Code
CLEVELAND	TN	37311

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FOWLER INDUSTRIAL PLATING LLC	INDUSTRIAL CHEMIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50280

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
FREDERICK FOX

Mailing Address 261 KENWOOD ROAD

City	State	Zip Code
CHAMBERSBURG	PA	17201

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50333

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAY FRAKER

Mailing Address **5675 SPRUCE HARBOR**

City **LAS VEGAS** State **NV** Zip Code **89122**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50473

Date of Receipt
 M M / D D / Y Y Y Y
07 / 05 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
J. R. FRASER

Mailing Address **4483 PARK PLACE TERRACE**

City **MARIETTA** State **GA** Zip Code **30066**

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

Name of Employer **NOVA COMMERCIAL INTERIORS, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50750

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

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN FREDERICKS

Mailing Address **306 PRESERVATION REACH**

City **CHESAPEAKE** State **VA** Zip Code **23320**

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

Name of Employer **JOHN FREDERICKS RADIO SHOW** Occupation **RADIO TALK SHOW HOST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.50860

Date of Receipt
 M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN FREEMAN

Mailing Address 11851 NE GLENN WIDING DR

City State Zip Code
PORTLAND OR 97220

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

Name of Employer Occupation
INVICTUS SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
238.45

Transaction ID : SA17A.50943

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

65.74

B. Full Name (Last, First, Middle Initial)
DAVID FRENCH

Mailing Address 19750 ESTANCIA TERRACE

City State Zip Code
ASHBURN VA 20147

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

Name of Employer Occupation
SYSCO SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.51055

Date of Receipt

M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
DAVID FRESHWATER

Mailing Address 929 CHARLESTON ROAD

City State Zip Code
SPENCER WV 25276

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

Name of Employer Occupation
CONTRACTOR SERVICES INC. OF WV BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
386.66

Transaction ID : SA17A.51109

Date of Receipt

M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

386.66

Subtotal Of Receipts This Page (optional).....▶ 702.40

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PATRICIA FRIEDLAND

Mailing Address 13427 E DEL TIMBRE DR

City SCOTTSDALE State AZ Zip Code 85259

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.51201

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			25			2015			

Amount of Each Receipt this Period

196.25

Amount of Each Receipt this Period

278.93

B. Full Name (Last, First, Middle Initial)
RUSSELL J FRYMAN

Mailing Address 180 W SHORE LN

City MONTGOMERY State TX Zip Code 77356

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.51488

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

1000.00

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
RICHARD FUISZ

Mailing Address 1238 COLDWATER CANYON DRIVE

City BEVERLY HILLS State CA Zip Code 90210

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

Name of Employer SELF Occupation PHYSICIAN/INVENTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.51556

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

250.00

Amount of Each Receipt this Period

250.00

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

1446.25

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

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**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THEODORE FULLER

Mailing Address **POB 4801**

City State Zip Code
INCLINE VILLAGE NV 89450

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 ▼
500.00

Transaction ID : SA17A.51655

Date of Receipt
M M / D D / Y Y Y Y
07 02 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
KIMBERLY FUSARO

Mailing Address **7 JOMARR PLACE**

City State Zip Code
MASSAPEQUA NY 11758

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 ▼
278.83

Transaction ID : SA17A.51787

Date of Receipt
M M / D D / Y Y Y Y
09 08 2015

Amount of Each Receipt this Period
158.83

C. Full Name (Last, First, Middle Initial)
VERNON B. GABRIEL

Mailing Address **43 NERN STREET - PO BOX 578**

City State Zip Code
CLAYTON AL 36016

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 : SA17A.51882

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

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **908.83**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VERNON B. GABRIEL

Mailing Address **43 NERN STREET - PO BOX 578**

City State Zip Code
CLAYTON AL 36016

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 ▼
312.79

Transaction ID : SA17A.51883

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

Amount of Each Receipt this Period
62.79

B. Full Name (Last, First, Middle Initial)
ALEXANDER GABRUS

Mailing Address **8455 OREILLY PLACE**

City State Zip Code
ANTELOPE CA 95843

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

Name of Employer Occupation
SIEMENS CONTROLLER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.51891

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
VINCENT GAETA

Mailing Address **2892 VISTA DEL SOL AVENUE**

City State Zip Code
LAS VEGAS NV 89120

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

Name of Employer Occupation
INFO STOR, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.51935

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

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **562.79**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BENJAMIN GALE

Mailing Address **PO BOX 347**

City **MIDDLEBURG** State **VA** Zip Code **20118**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.52113

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
THELMA GALE

Mailing Address **P O BOX 1028**

City **KEARNEY** State **NE** Zip Code **68848**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.52125

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN J GALIHER

Mailing Address **9 SYCAMORE DRIVE**

City **CHATHAM** State **NJ** Zip Code **07928**

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

Name of Employer **PREFERRED FREEZER SERVICES** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
514.86

Transaction ID : SA17A.52144

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
514.86

Subtotal Of Receipts This Page (optional).....▶ **1264.86**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 221 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL GAMPP

Mailing Address **5565 OSAGE WAY**

City **LARKSPUR** State **CO** Zip Code **80118**

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

Name of Employer **SELF** Occupation **SERVICE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.52391

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
LARRY GARDNER

Mailing Address **5115 ASPEN ST.**

City **BELLAIRE** State **TX** Zip Code **77401**

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

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.52667

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
BRAD C GAROFALO

Mailing Address **2221 PALO VERDE AVE, SUITE 2D**

City **LONG BEACH** State **CA** Zip Code **90815**

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

Name of Employer **SELF** Occupation **INSURANCE AGENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.52804

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period
 123.69

Amount of Each Receipt this Period
 244.76

Subtotal Of Receipts This Page (optional).....▶ 1373.69

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GIANPAOLO GARRONE

Mailing Address **17903 THEISS PARK LANE**

City **SPRING** State **TX** Zip Code **77379**

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

Name of Employer **GEMSTAR** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.52911

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KAREN GARSON

Mailing Address **8846 SILVERBARK DR**

City **GERMAMTOWN** State **TN** Zip Code **38138**

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

Name of Employer **SELF/HOUSEWIFE** Occupation **DOMESTIC GODDESS.**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
278.87

Transaction ID : SA17A.52927

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
278.87

C. Full Name (Last, First, Middle Initial)
RICHARD GATES

Mailing Address **5470 NW ELDORADO BLVD.**

City **BREMERTON** State **WA** Zip Code **98312**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.53113

Date of Receipt
 M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1528.87**

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALFONSO GAUDINO

Mailing Address 4939 WITH RAY RD

City	State	Zip Code
CHANDLER	AZ	85226

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.53158

Date of Receipt

<input type="text" value="07"/>	/	<input type="text" value="31"/>	/	<input type="text" value="2015"/>
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Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
BRENDA GEIST

Mailing Address 22 GLEN DEVON DRIVE

City	State	Zip Code
SOUTHERN PINES	NC	28387

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.53457

Date of Receipt

<input type="text" value="08"/>	/	<input type="text" value="08"/>	/	<input type="text" value="2015"/>
---------------------------------	---	---------------------------------	---	-----------------------------------

Amount of Each Receipt this Period

<input type="text" value="166.73"/>

C. Full Name (Last, First, Middle Initial)
JAMES GELB

Mailing Address 1925 ALTA AVE

City	State	Zip Code
SANTA MONICA	CA	90402

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.53470

Date of Receipt

<input type="text" value="08"/>	/	<input type="text" value="17"/>	/	<input type="text" value="2015"/>
---------------------------------	---	---------------------------------	---	-----------------------------------

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES GELB

Mailing Address 1925 ALTA AVE

City State Zip Code
SANTA MONICA CA 90402

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 ▼

Transaction ID : SA17A.149689

Date of Receipt

/ /

Redesignate:

Amount of Each Receipt this Period

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JAMES GELB

Mailing Address 1925 ALTA AVE

City State Zip Code
SANTA MONICA CA 90402

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 ▼

Transaction ID : SA17A.149690

Date of Receipt

/ /

Redesignate: GENERAL 2016

Amount of Each Receipt this Period

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JAMES GELFAND

Mailing Address 555 MASSACHUSETTS AVE NW APT 1416

City State Zip Code
WASHINGTON DC 20001

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

Name of Employer Occupation
MARCH OF DIMES DIRECTOR, FEDERAL AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.53476

Date of Receipt

/ /

Amount of Each Receipt this Period

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

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS GENIN

Mailing Address 114 MAIN ST

City State Zip Code
BAY SAINT LOU MS 39520

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

Name of Employer Occupation
THE BLIND TIGER OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
242.34

Transaction ID : SA17A.53554

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
242.34

B. Full Name (Last, First, Middle Initial)
SHARON GENOVESE

Mailing Address 177 LAFAYETTE TRAIL P.O. BOX 360

City State Zip Code
CHALK HILL PA 15421

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 ▼
500.00

Transaction ID : SA17A.53568

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GEORGE GERANIOS

Mailing Address 710 N CLAREMONT ST
APT 4

City State Zip Code
SAN MATEO CA 94401

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

Name of Employer Occupation
CENTRAL TRUCK DRIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
301.38

Transaction ID : SA17A.53746

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
251.38

Subtotal Of Receipts This Page (optional).....▶ 993.72

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DENNIS GERLAND		Transaction ID : SA17A.53825
Mailing Address 5019 TARNBROOK DRIVE HOUSTON		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2015
City HOUSTON	State TX	Zip Code 77084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer THE FMI GROUP, INC.	Occupation OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) RUSTY GERVAIS		Transaction ID : SA17A.53895
Mailing Address 4471 DEAN MARTIN DRIVE 1101		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015
City LAS VEGAS	State NV	Zip Code 89103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer EXPO NEW ORLEANS	Occupation PRESIDENT CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) JOAN GERVATOSKI		Transaction ID : SA17A.53897
Mailing Address 951 CYPRESS COVE WAY		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2015
City TARPON SPRINGS	State FL	Zip Code 34688
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Subtotal Of Receipts This Page (optional).....▶ **600.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOAN GERVATOSKI

Mailing Address 951 CYPRESS COVE WAY

City State Zip Code
TARPON SPRINGS FL 34688

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 ▼
285.17

Transaction ID : SA17A.53898

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

Amount of Each Receipt this Period
35.17

B. Full Name (Last, First, Middle Initial)
DONNA GIANNATTASIO

Mailing Address 39 S. TRANQUIL PATH

City State Zip Code
SPRING TX 77380

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 ▼
2000.00

Transaction ID : SA17A.54070

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

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
JOAN GIBB

Mailing Address 613 SOUTH BEACH ROAD

City State Zip Code
JUPITER FL 33469

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 : SA17A.54097

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 2285.17

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANTHONY GIBSON

Transaction ID : SA17A.54164

Mailing Address 1333 CORPORATE DRIVE

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

City	State	Zip Code
IRVING	TX	75038

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OSG, INC	BUSINESS OWNER

Amount of Each Receipt this Period

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

B. Full Name (Last, First, Middle Initial)
ANTHONY GIBSON

Transaction ID : SA17A.54165

Mailing Address 1333 CORPORATE DRIVE

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			26			2015			

City	State	Zip Code
IRVING	TX	75038

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OSG, INC	BUSINESS OWNER

Amount of Each Receipt this Period

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

C. Full Name (Last, First, Middle Initial)
DELMER GIBSON

Transaction ID : SA17A.54184

Mailing Address 201 SIOUX TRL.

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

City	State	Zip Code
GEORGETOWN	KY	40324

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Amount of Each Receipt this Period

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERNEST GIBSON

Mailing Address 4652 O'BANNON RD

City State Zip Code
FARMINGTON MO 63640

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

Name of Employer Occupation
LEE MECH OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.54188

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JAMES GIBSON

Mailing Address 1830 E BROADWAY BLVD

City State Zip Code
TUCSON AZ 85719

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 : SA17A.54196

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES GIBSON

Mailing Address 1830 E BROADWAY BLVD

City State Zip Code
TUCSON AZ 85719

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 ▼
500.00

Transaction ID : SA17A.54197

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES GIBSON

Mailing Address 1830 E BROADWAY BLVD

City State Zip Code
TUCSON AZ 85719

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 ▼
750.00

Transaction ID : SA17A.54198

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES GILBERT

Mailing Address POB 860

City State Zip Code
SUNRISE BEACH MO 65079

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 : SA17A.54369

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JON GILES

Mailing Address PO BOX 612

City State Zip Code
WEST END NC 27376

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

Name of Employer Occupation
SELF EMPLOYED SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.54439

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENNETH GILHOUSEN

Mailing Address 10590A FUQUA STREET

City State Zip Code
HOUSTON TX 77089

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

Name of Employer Occupation
IMPACT ACCOUNTING GROUP, INC. ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.54457

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LARRY GILL

Mailing Address 2081 MESA DR.

City State Zip Code
SEMMES AL 36575

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

Name of Employer Occupation
HOMES FOR OUR TROOPS VETERAN'S LIAISON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.91

Transaction ID : SA17A.54501

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
230.91

C. Full Name (Last, First, Middle Initial)
RHONDA GILLESPIE

Mailing Address 530 FINCHER DRIVE

City State Zip Code
COMMERCE GA 30529

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

Name of Employer Occupation
LANIER STEEL PRODUCTS, INC. MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
246.21

Transaction ID : SA17A.54572

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 830.91

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES GILLY

Mailing Address **PO BOX 2239**

City State Zip Code
PONTE VEDRA FL 32004

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

Name of Employer Occupation
GILLY DEVELOPMENT CORP WIRELESS TELECOM

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.54670

Date of Receipt
M M / D D / Y Y Y Y
07 09 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES GILLY

Mailing Address **PO BOX 2239**

City State Zip Code
PONTE VEDRA FL 32004

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

Name of Employer Occupation
GILLY DEVELOPMENT CORP WIRELESS TELECOM

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.54671

Date of Receipt
M M / D D / Y Y Y Y
09 30 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LEONARD LANCE GILMAN

Mailing Address **5 WILD HORSE CANYON DRIVE**

City State Zip Code
SPARKS NV 89434

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

Name of Employer Occupation
SELF REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.54675

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1500.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DENNIS GILSTAD

Mailing Address **7255 EAST BALDWIN ROAD**

City State Zip Code
GRAND BLANC MI 48439

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 ▼
1000.00

Transaction ID : SA17A.54726

Date of Receipt
M M / D D / Y Y Y Y
08 02 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WILLIAM GINETTI

Mailing Address **62 HEMINGWAY AVE.**

City State Zip Code
EAST HAVEN CT 06512

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 : SA17A.54739

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ALLAIN GIROUARD

Mailing Address **225 NORTH FOREST DUNE DRIVE**

City State Zip Code
ST AUGUSTINE FL 32080

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

Name of Employer Occupation
SELF EMPLOYED MD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.54834

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1500.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID GLADSTONE

Mailing Address 1161 CREST LANE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
GLADSTONE MANAGEMENT INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
270.77

Transaction ID : SA17A.54905

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
270.77

B. Full Name (Last, First, Middle Initial)
RICHARD GLANTZ

Mailing Address 217 CEDAR STREET, #283

City State Zip Code
SANDPOINT ID 83864-1410

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 ▼
209.69

Transaction ID : SA17A.54923

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
209.69

C. Full Name (Last, First, Middle Initial)
JIM GLASGOW

Mailing Address 3274 DUBUQUE ST. NE

City State Zip Code
IOWA CITY IA 52240

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

Name of Employer Occupation
METRO PLUMBING PLUMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.54947

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 580.46

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JIM GLASGOW

Mailing Address 3274 DUBUQUE ST. NE

City State Zip Code
IOWA CITY IA 52240

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

Name of Employer Occupation
METRO PLUMBING PLUMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.54948

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JERRY GLASS

Mailing Address 60 DALE STREET

City State Zip Code
TEMPLE GA 30179

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

Name of Employer Occupation
SELF EMPLOYED GLASS TRANSPORT COMPANY OWNER OPERATOR TRACTOR TRAILER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.54966

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CHRIS GLAZE

Mailing Address 1613 CRESTVIEW ROAD

City State Zip Code
REDLANDS CA 92374

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 ▼
239.33

Transaction ID : SA17A.55020

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Receipt this Period
133.40

Subtotal Of Receipts This Page (optional).....▶ 483.40

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LYNDA GLUCK

Mailing Address 1728 LAUREL CANYON BLVD
D

City State Zip Code
LOS ANGELES CA 90046

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

Name of Employer Occupation
SELF SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.55173

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LYNDA GLUCK

Mailing Address 1728 LAUREL CANYON BLVD
D

City State Zip Code
LOS ANGELES CA 90046

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

Name of Employer Occupation
SELF SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
334.14

Transaction ID : SA17A.55174

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

Amount of Each Receipt this Period
84.14

C. Full Name (Last, First, Middle Initial)
JAMES GODBER

Mailing Address 2455 E WILDWOOD CANYON DR

City State Zip Code
GLENORA CA 91741

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

Name of Employer Occupation
ADVANCED POWER PRODUCTS BATTERY SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.55231

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1334.14

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BARBARA GODLEWSKI

Mailing Address **9 SECOND AVE TERRACE**

City State Zip Code
WEST HAVEN CT 06516

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 : SA17A.55270

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

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT GOELDNER

Mailing Address **522 MACEWEN DR.**

City State Zip Code
OSOREY FL 34229

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 : SA17A.55326

Date of Receipt
M M / D D / Y Y Y Y
08 10 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DIANE GOERNER

Mailing Address **610 SEDGEWORTH CT.**

City State Zip Code
SIMI VALLEY CA 93065

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

Name of Employer Occupation
SECURITAS ADMIN ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.55349

Date of Receipt
M M / D D / Y Y Y Y
08 17 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARTIN GOFF

Mailing Address 902 EDINBURGH WAY

City State Zip Code
DOTHAN AL 36305

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

Name of Employer Occupation
GREAT SOUTHERN WOOD PRESERVING, IN DIRECTOR OF INTERNATIONAL TRADE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.55386

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. HOWARD GOLDBERG

Mailing Address 27 ROSE COURT WAY

City State Zip Code
EAST WALPOLE MA 02032

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.55440

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
CLINT GOODRICH

Mailing Address 625 E. MAIN ST
UNIT 102B #116

City State Zip Code
ASPEN CO 81611

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

Name of Employer Occupation
SELF TRADER/INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
228.29

Transaction ID : SA17A.55850

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

Amount of Each Receipt this Period
203.29

Subtotal Of Receipts This Page (optional).....▶ 753.29

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DIANA GOODWIN

Mailing Address 205 BASTIN RD.

City HOHENWALD State TN Zip Code 38462

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

Name of Employer SELF Occupation MANUFACTURING

Receipt For: 2016
 Primary General
 Other (specify) **205.23**

Transaction ID : SA17A.55880

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
205.23

B. Full Name (Last, First, Middle Initial)
DIANA GOODWIN

Mailing Address 205 BASTIN RD.

City HOHENWALD State TN Zip Code 38462

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

Name of Employer SELF Occupation MANUFACTURING

Receipt For: 2016
 Primary General
 Other (specify) **305.23**

Transaction ID : SA17A.55881

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ROBERT TRUMAN GOODWIN

Mailing Address 239 DEROSA DRIVE

City HAMPTON State VA Zip Code 23666

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

Name of Employer US DEPARTMENT OF DEFENSE Occupation AUDITOR

Receipt For: 2016
 Primary General
 Other (specify) **500.00**

Transaction ID : SA17A.55905

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **805.23**

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

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

**A. Full Name (Last, First, Middle Initial)
MIRCEA C.PAUL GORENIUC**

Mailing Address 12515 PHELPS AVE

City SAN JOSE State CA Zip Code 95117

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.56043

Date of Receipt

MM / DD / YYYY
08 / 02 / 2015

Amount of Each Receipt this Period

500.00

**B. Full Name (Last, First, Middle Initial)
STEVE GORLIN**

Mailing Address 1234 AIRPORT RD #105

City DESTIN State FL Zip Code 32541

FEC ID number of contributing federal political committee.

C

Name of Employer
NANTKWEST

Occupation
VICE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.56065

Date of Receipt

MM / DD / YYYY
08 / 21 / 2015

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)
ROBERT GORMAN**

Mailing Address 101 CASPERS ST

City EDMONDS State WA Zip Code 98020

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF

Occupation
RESTAURANT OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.56085

Date of Receipt

MM / DD / YYYY
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

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

3450.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM GOSNELL

Mailing Address **8809 OVERHILL ROAD**

City **RICHMOND** State **VA** Zip Code **23229**

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

Name of Employer **CLAIMS RESOURCE MANAGEMENT** Occupation **INSURANCE ADJUSTER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.56161

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DARRELL GOSS

Mailing Address **9704 CLIFFSIDE DR**

City **IRVING** State **TX** Zip Code **75063**

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

Name of Employer **MAXIM INTEGRATED** Occupation **ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.56167

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2015

Amount of Each Receipt this Period
209.69

C. Full Name (Last, First, Middle Initial)
ANN GOSSELIN

Mailing Address **3812 N STONE GULLY**

City **MESA** State **AZ** Zip Code **85207**

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

Name of Employer **PIN 1 TECHNOLOGY, INC** Occupation **SELF-EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.56194

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **1209.69**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSE GOYANES

Mailing Address **4 SE 1 STREET**

City State Zip Code
MIAMI FL 33131

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

Name of Employer Occupation
METRO BEAUTY CENTERS SALES & SERVICES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.56354

Date of Receipt
M M / D D / Y Y Y Y
07 28 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PHILIP P GRABER

Mailing Address **724 CROSBY LANE LOT 200**

City State Zip Code
SPRING CITY TN 37381

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

Name of Employer Occupation
WILLIAMS PLANT SERVICES SVCS, LLC UNION PIPEFITTER-PLUMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
208.18

Transaction ID : SA17A.56375

Date of Receipt
M M / D D / Y Y Y Y
08 18 2015

Amount of Each Receipt this Period
108.18

C. Full Name (Last, First, Middle Initial)
ROBERT GRAHAM

Mailing Address **81 LAKEVIEW DRIVE**

City State Zip Code
NOTTINGHAM NH 03290

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

Name of Employer Occupation
SELF REAL ESTATE CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.56562

Date of Receipt
M M / D D / Y Y Y Y
08 17 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **708.18**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL GRANDE

Mailing Address 120 WYLLIS AVE
UNIT#215

City State Zip Code
EVERETT MA 02149

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

Name of Employer Occupation
SEMPER DIVE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
295.09

Transaction ID : SA17A.56619

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
95.09

B. Full Name (Last, First, Middle Initial)
HENRY GRANTHAM

Mailing Address 1925 LAKESIDE DR

City State Zip Code
ORLANDO FL 32803

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 ▼
300.00

Transaction ID : SA17A.56735

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
GERARD GRASECK

Mailing Address PO BOX 1485

City State Zip Code
SOUTHOLD NY 11971

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

Name of Employer Occupation
SOUTHOLD QUARRY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
245.34

Transaction ID : SA17A.56752

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
245.34

Subtotal Of Receipts This Page (optional).....▶ 640.43

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT GRASSO

Mailing Address **850 N RANDOLPH ST**
1613

City **ARLINGTON** State **VA** Zip Code **22203**

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

Name of Employer **US GOVERNMENT STATE DEPARTMENT** Occupation **FOREIGN SERVICE OFFICER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.56776

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROSE GRAVOIS

Mailing Address **17449 GEORGE ONEAL RD**

City **BATON ROUGE** State **LA** Zip Code **70817**

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

Name of Employer **LTC SOLUTIONS** Occupation **REGISTERED NURSE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
380.86

Transaction ID : SA17A.56841

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
257.78

C. Full Name (Last, First, Middle Initial)
ROSE GRAVOIS

Mailing Address **17449 GEORGE ONEAL RD**

City **BATON ROUGE** State **LA** Zip Code **70817**

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

Name of Employer **LTC SOLUTIONS** Occupation **REGISTERED NURSE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
530.86

Transaction ID : SA17A.56842

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
150.00

Subtotal Of Receipts This Page (optional)..... **657.78**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 245 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

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

ROSE GRAVOIS

Mailing Address 17449 GEORGE ONEAL RD

City	State	Zip Code
BATON ROUGE	LA	70817

FEC ID number of contributing
federal political committee.

C

Name of Employer
LTC SOLUTIONSOccupation
REGISTERED NURSE

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

597.96

Transaction ID : SA17A.56843

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			12			2015			

Amount of Each Receipt this Period

67.10

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

ANDREW GREEN

Mailing Address 705 BLUME DR.

City	State	Zip Code
GALVESTON	TX	77554

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.57017

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

ELENA GREEN

Mailing Address 277 WASHINGTON AVE
1K

City	State	Zip Code
BROOKLYN	NY	11205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.57047

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			11			2015			

Amount of Each Receipt this Period

500.00

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

817.10

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

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MIKE GREENAMYRE			Transaction ID : SA17A.57150 Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>08</td><td></td><td></td><td>01</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			01			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			01			2015																			
Mailing Address 16 LIMIT STREET			Amount of Each Receipt this Period <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td></tr> </table>																			250.00			
						250.00																			
City LEAVENWORTH	State KS	Zip Code 66048																							
FEC ID number of contributing federal political committee. <table border="1"> <tr><td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>			C																						
C																									
Name of Employer SELF	Occupation MANAGE MY FAMLAY'S RENTAL PROPERTI																								
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td></tr> </table>																		250.00						
						250.00																			

B. Full Name (Last, First, Middle Initial) DAVID GREENE			Transaction ID : SA17A.57191 Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>25</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	07			25			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
07			25			2015																			
Mailing Address 94178 KAIMA PLACE			Amount of Each Receipt this Period <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>500.00</td><td></td><td></td><td></td></tr> </table>																			500.00			
						500.00																			
City WAIPAHU	State HI	Zip Code 96797																							
FEC ID number of contributing federal political committee. <table border="1"> <tr><td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>			C																						
C																									
Name of Employer DAVE'S A/C SERVICE	Occupation SELF-EMPLOYED																								
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>500.00</td><td></td><td></td><td></td></tr> </table>																		500.00						
						500.00																			

C. Full Name (Last, First, Middle Initial) ROCKY GREENFIELD			Transaction ID : SA17A.57235 Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	07			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
07			31			2015																			
Mailing Address PO BOX 2230 /4047 N OCOTILLO RD			Amount of Each Receipt this Period <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td></tr> </table>																			250.00			
						250.00																			
City BENSON	State AZ	Zip Code 85602																							
FEC ID number of contributing federal political committee. <table border="1"> <tr><td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>			C																						
C																									
Name of Employer SELF	Occupation RANCHER																								
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td></tr> </table>																		250.00						
						250.00																			

Subtotal Of Receipts This Page (optional).....	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>1000.00</td><td></td><td></td><td></td></tr> </table>																	1000.00			
						1000.00															
Total This Period (last page this line number only).....	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																				

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES "OWEN" GREESON

Mailing Address 3065 BROOKVIEW DR

City MARIETTA State GA Zip Code 30068

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.57322

Date of Receipt

M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
JOY GREGGO

Mailing Address 5010 KENNETT PIKE

City WILMINGTON State DE Zip Code 19807

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.57345

Date of Receipt

M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
FREDERICK GREGORY

Mailing Address 83 COOK AVE

City YONKERS State NY Zip Code 10701-6339

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.57373

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 3450.00

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FREDERICK GREGORY

Mailing Address **83 COOK AVE**

City **YONKERS** State **NY** Zip Code **10701-6339**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.57374

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID GRETH

Mailing Address **1 CARAMIST DRIVE**

City **SINKING SPRING** State **PA** Zip Code **19608**

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

Name of Employer **STORAGE WORLD** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.57502

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. DOMENIC R GRIECO

Mailing Address **7 CHRISTOPHER DR**

City **LINCOLN** State **RI** Zip Code **02865**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.57541

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
600.00

Subtotal Of Receipts This Page (optional)..... **1100.00**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) GILBERT GRIEVE		Transaction ID : SA17A.57556	
Mailing Address 240 TELEGRAPH ST.		Date of Receipt	
City: RENO State: NV Zip Code: 89502		M M / D D / Y Y Y Y 08 / 01 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer: CONCOURS BODY SHOP Occupation: OWNER		<input type="text" value="250.00"/>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) IVAN GRIFFIN		Transaction ID : SA17A.57592	
Mailing Address 25108STATE HWY 25		Date of Receipt	
City: BLOOMFIELD State: MO Zip Code: 63825		M M / D D / Y Y Y Y 07 / 31 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer: RETIRED Occupation: RETIRED		<input type="text" value="250.00"/>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	

C. Full Name (Last, First, Middle Initial) PETER GRIFFIN		Transaction ID : SA17A.57628	
Mailing Address 56 GREGORY RD.		Date of Receipt	
City: FRAMINGHAM State: MA Zip Code: 01701		M M / D D / Y Y Y Y 08 / 18 / 2015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer: RETIRED Occupation: RETIRED		<input type="text" value="160.98"/>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="327.15"/>	

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

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PETER GRIFFIN

Mailing Address **56 GREGORY RD.**

City	State	Zip Code
FRAMINGHAM	MA	01701

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 ▼

363.82

Transaction ID : SA17A.57629

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

36.67

B. Full Name (Last, First, Middle Initial)
WALLACE M GRIFFIN

Mailing Address **5115 N LONG RIFLE ROAD**

City	State	Zip Code
PRESCOTT VALLEY	AZ	86314

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

Primary General

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.57654

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
GEORGE GRIGORIAN

Mailing Address **181 GROTON PLACE**

City	State	Zip Code
WEST HEMPSTEAD	NY	11552

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

Name of Employer	Occupation
GRIGORIAN DESIGN GROUP, LTD.	ARCHITECT

Receipt For: 2016

Primary General

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.57759

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **386.67**

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
REX GROSSMAN

Mailing Address 715 SE 8TH ST

City State Zip Code
DELRAY BEACH FL 33483

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

Name of Employer Occupation
SAMSUNG SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.12

Transaction ID : SA17A.58112

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
52.25

B. Full Name (Last, First, Middle Initial)
JOHN GROVES

Mailing Address 2400 TIMBERLINE
160

City State Zip Code
GRAPEVINE TX 76051

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

Name of Employer Occupation
CLASSIC CHEVROLET SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.58173

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT GUARINI

Mailing Address 263 PRINCESS PALM RD.

City State Zip Code
BOCA RATON FL 33432

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

Name of Employer Occupation
GREEN PARK MANAGEMENT HOTEL OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.58297

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 552.25

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT GUARINI

Mailing Address 263 PRINCESS PALM RD.

City BOCA RATON State FL Zip Code 33432

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

Name of Employer GREEN PARK MANAGEMENT Occupation HOTEL OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Transaction ID : SA17A.58298

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
ROBERT GUARINI

Mailing Address 263 PRINCESS PALM RD.

City BOCA RATON State FL Zip Code 33432

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

Name of Employer GREEN PARK MANAGEMENT Occupation HOTEL OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 458.21

Transaction ID : SA17A.58299

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

108.21

C. Full Name (Last, First, Middle Initial)
ROBERT GUARINI

Mailing Address 263 PRINCESS PALM RD.

City BOCA RATON State FL Zip Code 33432

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

Name of Employer GREEN PARK MANAGEMENT Occupation HOTEL OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 591.39

Transaction ID : SA17A.58300

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

133.18

Subtotal Of Receipts This Page (optional)..... 341.39

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

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM GUDITUS

Mailing Address **PO BOX 8**

City State Zip Code
EASTPORT NY 11941

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

Name of Employer Occupation
POWERHOUSE INDUSTRIES INC. SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.58348

Date of Receipt
M M / D D / Y Y Y Y
08 16 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BRANDON GUENTHER

Mailing Address **4742 BLUE ROCK RD
1**

City State Zip Code
CINCINNATI OH 45247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED MARINER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.58367

Date of Receipt
M M / D D / Y Y Y Y
07 10 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DENNIS GUERIN

Mailing Address **P.O. BOX 21407**

City State Zip Code
AUBURN HILLS MI 48321

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 : SA17A.58375

Date of Receipt
M M / D D / Y Y Y Y
08 19 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 254 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) SAMUEL GUILLAUME			Transaction ID : SA17A.58478																						
Mailing Address 1812 W SHERWAY ST			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	07			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
07			31			2015																			
City WEST COVINA		State CA	Zip Code 91790																						
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>																						
Name of Employer WEST COAST SAND & GRAVEL INC		Occupation SALES																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																						
			Amount of Each Receipt this Period <input type="text" value="250.00"/>																						
B. Full Name (Last, First, Middle Initial) RAYMOND GUNN			Transaction ID : SA17A.58591																						
Mailing Address 7688 SAWGRASS DR			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>06</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			06			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			06			2015																			
City WASHINGTON		State MI	Zip Code 48094																						
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>																						
Name of Employer SELF EMPLOYED		Occupation SELF EMPLOYED																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																						
			Amount of Each Receipt this Period <input type="text" value="250.00"/>																						
C. Full Name (Last, First, Middle Initial) CHRISTOPHER D GUNTER			Transaction ID : SA17A.58603																						
Mailing Address 3051 LEGENDS YORK			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>23</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			23			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			23			2015																			
City SPRING		State TX	Zip Code 77386																						
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>																						
Name of Employer WELLS FARGO ADVISORS		Occupation PERSONAL BANKER																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="209.69"/>																						
			Amount of Each Receipt this Period <input type="text" value="209.69"/>																						

Subtotal Of Receipts This Page (optional).....
Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOSEPH A GURRERI Mailing Address 3410 BLACKFRIAR LANE City YORK State PA Zip Code 17402 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation GURRERI AUTO AUTO TECHNICIAN Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date <input type="text" value="368.52"/>		Transaction ID : SA17A.58690 Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2015 Amount of Each Receipt this Period <input type="text" value="184.26"/>
B. Full Name (Last, First, Middle Initial) RICHARD GUYNN Mailing Address 4580 GARDEN BROOK DR City CHICO State CA Zip Code 95973 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation SELF EMPLOYEED AUTOMOTIVE Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date <input type="text" value="250.00"/>		Transaction ID : SA17A.58823 Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
C. Full Name (Last, First, Middle Initial) ANDREW GUZMAN Mailing Address 7975 NW 154TH ST SUITE 480 City MIAMI LAKES State FL Zip Code 33016 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation SELF PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date <input type="text" value="250.00"/>		Transaction ID : SA17A.58834 Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANDREW GUZMAN

Mailing Address **7975 NW 154TH ST
SUITE 480**

City **MIAMI LAKES** State **FL** Zip Code **33016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
308.45

Transaction ID : SA17A.58835

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			25			2015			

Amount of Each Receipt this Period

58.45

B. Full Name (Last, First, Middle Initial)
RICHARD HAASE

Mailing Address **2682 GLENEAGLES DR**

City **CLEARWATER** State **FL** Zip Code **33761**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.58905

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			07			2015			

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
PETER HABIG

Mailing Address **79 DIVISION AVENUE**

City **SUMMIT** State **NJ** Zip Code **07901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Transaction ID : SA17A.58944

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			18			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **408.45**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARY JO & JOSEPH E HACKETT

Mailing Address **44 WEST SADDLE RIVER RD**

City **SADDLE RIVER** State **NJ** Zip Code **07458**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
251.00

Transaction ID : SA17A.58969

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
251.00

B. Full Name (Last, First, Middle Initial)
CHAD HAGWOOD

Mailing Address **33 INVERNESS CENTER, SUITE 150**

City **BIRMINGHAM** State **AL** Zip Code **35242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAPITAL ONE** Occupation **COMMERCIAL MORTGAGE BANKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
238.01

Transaction ID : SA17A.59180

Date of Receipt
 M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
238.01

C. Full Name (Last, First, Middle Initial)
CHAD HAGWOOD

Mailing Address **33 INVERNESS CENTER, SUITE 150**

City **BIRMINGHAM** State **AL** Zip Code **35242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAPITAL ONE** Occupation **COMMERCIAL MORTGAGE BANKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1738.01

Transaction ID : SA17A.59181

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
1500.00

Subtotal Of Receipts This Page (optional).....▶ **1989.01**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JUNE HALES Mailing Address 5183 SOLAR RIDGE DR City COLORADO SPRINGS State CO Zip Code 80917 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 250.00		Transaction ID : SA17A.59397 Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2015
--	--	---

B. Full Name (Last, First, Middle Initial) JOHN HALL Mailing Address 1177 QUEEN STREET PH2 City HONOLULU State HI Zip Code 96814 FEC ID number of contributing federal political committee. C Name of Employer INSURANCE ASSOCIATES Occupation DIRECTOR OF SALES Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 233.39		Transaction ID : SA17A.59525 Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2015
--	--	---

C. Full Name (Last, First, Middle Initial) JOHN HALL Mailing Address 1177 QUEEN STREET PH2 City HONOLULU State HI Zip Code 96814 FEC ID number of contributing federal political committee. C Name of Employer INSURANCE ASSOCIATES Occupation DIRECTOR OF SALES Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 107.97		Transaction ID : SA17A.59526 Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2015
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Subtotal Of Receipts This Page (optional).....▶ **591.36**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SANDRA L HALMA

Mailing Address PO BOX 1993

City State Zip Code
SUN CITY AZ 85372

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.59717

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
JIM HALTOM

Mailing Address 714 SAM DAVIS RD

City State Zip Code
ARGYLE TX 76226

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.59740

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
RICHARD HAMILL

Mailing Address 1307 IDLEWOOD DR

City State Zip Code
SUN CITY CENTER FL 33573

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.59842

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

209.69

Subtotal Of Receipts This Page (optional).....▶ 959.69

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAWN HAMILTON

Mailing Address 22911 MAIDEN LANE

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE APPRAISER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.59867

Date of Receipt

/ /

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ROCHARD HAMILTON

Mailing Address 130 S. MASS. AVE. #802

City State Zip Code
LAKELAND FL 33801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CRMD PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.59934

Date of Receipt

/ /

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
WARD HAMILTON

Mailing Address 87 EAST EMERSON STREET

City State Zip Code
MELROSE MA 02176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OLDE MOHAWK INC MASON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
289.76

Transaction ID : SA17A.59951

Date of Receipt

/ /

Amount of Each Receipt this Period

89.76

Subtotal Of Receipts This Page (optional)..... **589.76**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

 Use separate schedule(s)
for each category of the
Detailed Summary Page

 FOR LINE NUMBER:
(check only one)

PAGE 261 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

ARNOLD HAMPEL

Mailing Address 16914 E DE ANZA DRIVE

City	State	Zip Code
FOUNTAIN HILLS	AZ	85268

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.60127

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

DAVID HANSEN

Mailing Address 540 BROADWAY

City	State	Zip Code
EL CENTRO	CA	92243

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
FABRICATER--INSTALLER

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17A.60450

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

DAVID HANSEN

Mailing Address 540 BROADWAY

City	State	Zip Code
EL CENTRO	CA	92243

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
FABRICATER--INSTALLER

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Transaction ID : SA17A.60451

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....

450.00

Total This Period (last page this line number only).....

SCHEDULE A-P
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 262 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

<p>A. Full Name (Last, First, Middle Initial) TOM HANSEN</p> <p>Mailing Address 1059 TULIP TREE LANE</p> <p>City WEST DES MOINES State IA Zip Code 50266</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer IOWA CLINIC Occupation PHYSICIAN</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Transaction ID : SA17A.60510</p> <p>Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2015</p> <p>Amount of Each Receipt this Period 250.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) KRISTA HANSON</p> <p>Mailing Address 6541 ODESSA AVE UNIT 1</p> <p>City VAN NUYS State CA Zip Code 91406</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GORELICK & USLANER Occupation CPA</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Transaction ID : SA17A.60562</p> <p>Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2015</p> <p>Amount of Each Receipt this Period 250.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) JAMES HARDMAN</p> <p>Mailing Address 3244 DUNLAP DRIVE</p> <p>City GAINESVILLE State GA Zip Code 30506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer JIM HARDMAN BUICK GMC, INC, Occupation OWNER</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2700.00</p>	<p>Transaction ID : SA17A.60760</p> <p>Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2015</p> <p>Amount of Each Receipt this Period 2700.00</p>
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<p>Subtotal Of Receipts This Page (optional).....</p>	<p>3200.00</p>
<p>Total This Period (last page this line number only).....</p>	<p></p>

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER A HARMON

Mailing Address 4020 SIERRA COLLEGE BLVD
SUITE 200

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF REDLANDS COUNSELOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.60905

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. MARTIN A HARMON

Mailing Address 4020 SIERRA COLLEGE BLVD
SUITE 200

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTERN CARE CONSTRUCTION BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.60917

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. MARTIN A HARMON

Mailing Address 4020 SIERRA COLLEGE BLVD
SUITE 200

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTERN CARE CONSTRUCTION BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.60918

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 8100.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. MARTIN A HARMON

Mailing Address **4020 SIERRA COLLEGE BLVD
SUITE 200**

City **ROCKLIN** State **CA** Zip Code **95677**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WESTERN CARE CONSTRUCTION** Occupation **BUSINESSMAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8100.00

Transaction ID : SA17A.60919

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

REFUNDED \$2,700 10/1/15

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
CRAIG HARMS

Mailing Address **6 E SEQUOIA DR**

City **WICHITA** State **KS** Zip Code **67206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
288.93

Transaction ID : SA17A.60944

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
188.93

C. Full Name (Last, First, Middle Initial)
CRAIG HARMS

Mailing Address **6 E SEQUOIA DR**

City **WICHITA** State **KS** Zip Code **67206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
394.41

Transaction ID : SA17A.60945

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
105.48

Subtotal Of Receipts This Page (optional)..... **2994.41**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAMELA HARNAGEL

Mailing Address 6975 HEREDIA COURT

City State Zip Code
AUBURN CA 95602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIDDEN FALLS RANCH & VINEYARD RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.60955

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
PAMELA HARNAGEL

Mailing Address 6975 HEREDIA COURT

City State Zip Code
AUBURN CA 95602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIDDEN FALLS RANCH & VINEYARD RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
340.29

Transaction ID : SA17A.60956

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
90.29

C. Full Name (Last, First, Middle Initial)
PAMELA HARNAGEL

Mailing Address 6975 HEREDIA COURT

City State Zip Code
AUBURN CA 95602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIDDEN FALLS RANCH & VINEYARD RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
590.29

Transaction ID : SA17A.60957

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 590.29

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SINN HAROLD

Mailing Address 112 ST JOSEPH AVE

City	State	Zip Code
OFALLON	MO	63366

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.60988

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
LARRY HARPER

Mailing Address 285 WEST - 100 NORTH

City	State	Zip Code
TIPTON	IN	46072

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.61016

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
DR. BILL HARRELL

Mailing Address 379 AUBURN DR

City	State	Zip Code
ALEXANDER CITY	AL	35010

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
HARRELL ORTHODONTICS	ORTHODONTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.61094

Date of Receipt

M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 750.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE HARRIS

Mailing Address **PO BOX 38**

City State Zip Code
LAKEBAY WA 98349

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NW FORWARDING LOGISTICS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.64

Transaction ID : SA17A.61174

Date of Receipt
M M / D D / Y Y Y Y
08 07 2015

Amount of Each Receipt this Period
186.64

B. Full Name (Last, First, Middle Initial)
DAVID HARRIS

Mailing Address **184 WARD ROWE ROAD**

City State Zip Code
LIMESTONE TN 37681

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 ▼
371.65

Transaction ID : SA17A.61204

Date of Receipt
M M / D D / Y Y Y Y
09 09 2015

Amount of Each Receipt this Period
184.05

C. Full Name (Last, First, Middle Initial)
BILL HARRISON

Mailing Address **1029 PEACHTREE PKWY N
#306**

City State Zip Code
PEACHTREE CITY GA 30269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEMAND MANAGEMENT INC PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.61369

Date of Receipt
M M / D D / Y Y Y Y
07 29 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **870.69**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BILL HARRISON

Mailing Address 1029 PEACHTREE PKWY N
#306

City State Zip Code
PEACHTREE CITY GA 30269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEMAND MANAGEMENT INC PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.61370

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
NANCY HARRIS ROBERTSON

Mailing Address 10320 E MOUNTAIN SPRING ROAD

City State Zip Code
SCOTTSDALE AZ 85255

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 : SA17A.61350

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM HART

Mailing Address 20 MILL RD

City State Zip Code
NORTH HAMPTON NH 03862

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 : SA17A.61558

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 600.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM HART

Mailing Address 20 MILL RD

City State Zip Code
NORTH HAMPTON NH 03862

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 ▼
281.93

Transaction ID : SA17A.61559

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
31.93

B. Full Name (Last, First, Middle Initial)
EARL HARTER

Mailing Address 129 VIKING WAY

City State Zip Code
NAPLES FL 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SYNNECTION BUSINESS SECURITY & CONTINUITY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.61565

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CHAD HARTING

Mailing Address 29468 RUSTIC LANE

City State Zip Code
MERRIFIELD MN 56465

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMPLOYMENT RESOURCE CENTER BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.61579

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period
209.69

Subtotal Of Receipts This Page (optional).....▶ 491.62

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JAMES HARTMAN Mailing Address 4909 KUTZTOWN ROAD City TEMPLE State PA Zip Code 19560 FEC ID number of contributing federal political committee. C Name of Employer Occupation JIMBO'S STEAKS AND HOAGIES SELF EMPLOYED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼		Transaction ID : SA17A.61626 Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2015 Amount of Each Receipt this Period 268.96 Election Cycle-to-Date ▼ 268.96
--	--	---

B. Full Name (Last, First, Middle Initial) MICHAEL HARVANKO Mailing Address 7509 ASTER DRIVE. City BROOKLYN PARK State MN Zip Code 55428 FEC ID number of contributing federal political committee. C Name of Employer Occupation CENTERPOINT ENERGY MECHANIC Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼		Transaction ID : SA17A.61703 Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2015 Amount of Each Receipt this Period 250.00 Election Cycle-to-Date ▼ 250.00
--	--	---

C. Full Name (Last, First, Middle Initial) KAROLYN HARVILL Mailing Address 7193 REEF STREET City NAVARRE State FL Zip Code 32566 FEC ID number of contributing federal political committee. C Name of Employer Occupation KAROLYN HARVILL REAL ESTATE Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼		Transaction ID : SA17A.61777 Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2015 Amount of Each Receipt this Period 100.00 Election Cycle-to-Date ▼ 242.11
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Subtotal Of Receipts This Page (optional).....▶ **618.96**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRIS HATCHER

Mailing Address **5707 BOLIVAR ST.**

City	State	Zip Code
RIVERSIDE	CA	92505

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INTILHOUSE	HOME AUTOMATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.61939

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	5

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
PAULA HATHAWAY

Mailing Address **PO BOX 5003**

City	State	Zip Code
SOUTHAMPTON	NY	11969

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DOUGLAS ELLIMAN REAL ESTATE	REAL ESTATE ASSOCIATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.61974

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
BETTY HAWKINS

Mailing Address **1801 OLDS COURT**

City	State	Zip Code
MARCO ISLAND	FL	34145

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 : SA17A.62134

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1000.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES HAWKINS

Mailing Address 747 VALE VIEW DRIVE

City VISTA State CA Zip Code 92081

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62151

Date of Receipt
M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SHELTON HAWLEY

Mailing Address PO BOX 1545

City ANGIER State NC Zip Code 27501

FEC ID number of contributing federal political committee. **C**

Name of Employer CPA Occupation SHELTON L HAWLEY CPA PA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62204

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DIANA HAWTHORNE

Mailing Address 1616 GLENBROOK COURT

City COLUMBIA State MO Zip Code 65203

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62212

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MEHMET HAYAT		Transaction ID : SA17A.62245
Mailing Address 151-37 WILLETS POINT BOULEVARD		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2015
City WHITESTONE State NY Zip Code 11357	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer DSNY Occupation SAN MAN	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

B. Full Name (Last, First, Middle Initial) FRANK HAYDEN		Transaction ID : SA17A.62270
Mailing Address 12814 IRONSTONE WAY APT 301		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2015
City PARKER State CO Zip Code 80134	Amount of Each Receipt this Period 110.86	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 110.86	
Name of Employer RETIRED Occupation RETIRED	Election Cycle-to-Date 210.86	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.86	

C. Full Name (Last, First, Middle Initial) JENNIFER HAYES		Transaction ID : SA17A.62345
Mailing Address 6410 E FOREST LAKE DR		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015
City TIFTON State GA Zip Code 31794	Amount of Each Receipt this Period 111.16	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 111.16	
Name of Employer RETIRED Occupation RETIRED	Election Cycle-to-Date 201.56	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 201.56	

Subtotal Of Receipts This Page (optional)..... 472.02

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JENNIFER HAYES

Mailing Address **6410 E FOREST LAKE DR**

City **TIFTON** State **GA** Zip Code **31794**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.15

Transaction ID : SA17A.62346

Date of Receipt
 M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
32.59

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL C HAYNES

Mailing Address **53 PINE ST**

City **SOUTH EASTON** State **MA** Zip Code **02375**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.62442

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
WILLIAM HAYNES

Mailing Address **404 WINDWARD PASSAGE**

City **SLIDELL** State **LA** Zip Code **70458**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SHELL** Occupation **COMMUNICATIONS ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62446

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **582.59**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVE HAYS

Mailing Address **1301 SANDPIPER DRIVE**

City **BEATRICE** State **NE** Zip Code **68310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MIDWEST LIVESTOCK SYSTEM** Occupation **MANAGEMENT/SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62462

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			02			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
WUXI HE

Mailing Address **1234 COMMONWEALTH AVE**
11

City **ALLSTON** State **MA** Zip Code **02134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.62510

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
PHILIP HEALY

Mailing Address **4 MAIN STREET**

City **PETERBOROUGH** State **NH** Zip Code **03458**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RT CONSULTING** Occupation **CONSULTING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.62573

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ **3950.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN HEARNEY

Mailing Address 4420 EAGLE DRIVE

City State Zip Code
SUTHERLAND VA 23885

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 : SA17A.62612

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN HEARNEY

Mailing Address 4420 EAGLE DRIVE

City State Zip Code
SUTHERLAND VA 23885

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 ▼
287.62

Transaction ID : SA17A.62613

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period
37.62

C. Full Name (Last, First, Middle Initial)
VAUGHN HEBERLEE

Mailing Address 13220 BRIDGEPORT XING

City State Zip Code
LAKEWOOD RANCH FL 34211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRANDON HONDA SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.62659

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 537.62

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENT HEDRICK

Mailing Address 350 S. COLLIER BLVD
103

City State Zip Code
MARCO ISLAND FL 34145

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MARCO ISLAND REAL ESTATE.COM BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.62767

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DAVE HEFFERNAN

Mailing Address 169 BEACH 91ST STREET

City State Zip Code
ROCKAWAY BEACH NY 11693

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF REAL ESTATE ((-:

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.62785

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CHANDI HEFFNER

Mailing Address KEAWEWAI RANCH

City State Zip Code
KAMUELA HI 96743

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.62799

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City	State	Zip Code
NOTRE DAME	IN	46556

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 220.02

Transaction ID : SA17A.62824

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

_____ 36.67

B. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City	State	Zip Code
NOTRE DAME	IN	46556

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 256.69

Transaction ID : SA17A.62825

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

_____ 36.67

C. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City	State	Zip Code
NOTRE DAME	IN	46556

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 293.36

Transaction ID : SA17A.62826

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

_____ 36.67

Subtotal Of Receipts This Page (optional).....▶ _____ 110.01

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City State Zip Code
NOTRE DAME IN 46556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
330.03

Transaction ID : SA17A.62827

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
36.67

B. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City State Zip Code
NOTRE DAME IN 46556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
366.70

Transaction ID : SA17A.62828

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
36.67

C. Full Name (Last, First, Middle Initial)
JOHN HEGARTY

Mailing Address 122 STANFORD HALL

City State Zip Code
NOTRE DAME IN 46556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
398.37

Transaction ID : SA17A.62831

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
31.67

Subtotal Of Receipts This Page (optional).....▶ 105.01

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENT HEIBAK

Mailing Address **67 IDLEWOOD ROAD**

City State Zip Code
KENTFIELD CA 94904

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 ▼
500.00

Transaction ID : SA17A.62851

Date of Receipt
M M / D D / Y Y Y Y
07 16 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEREMY HEIDL

Mailing Address **7580 EAST 6TH AVE**

City State Zip Code
DENVER CO 80230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NCG COO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.62865

Date of Receipt
M M / D D / Y Y Y Y
08 22 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MARIA HEISE

Mailing Address **401 WALLS WAY**

City State Zip Code
OSPREY FL 34229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FINANCIAL CONTROLLER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.62978

Date of Receipt
M M / D D / Y Y Y Y
08 11 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **2000.00**

Total This Period (last page this line number only).....▶

**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
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD HELD

Mailing Address 6081 SILVER KING BLVD UNIT 201

City State Zip Code
CAPE CORAL FL 33914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONSULTANT CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.63025

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT HEMME

Mailing Address 28544 OLD TOWN FRONT ST #302

City State Zip Code
TEMECULA CA 92590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STRACHOTA INSURANCE INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.63201

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CARL D HEMPE

Mailing Address 23238 MILLVILLE WAY

City State Zip Code
MILLVILLE CA 96062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.63218

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KAREN HENDRY

Mailing Address 711 EMAIL ST

City	State	Zip Code
IMMOKALEE	FL	34142

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BHI	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.63436

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
LEE HENNINGSEN

Mailing Address 32512 ARCHDALE

City	State	Zip Code
CHAPEL HILL	NC	27517

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.63540

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DAVID HENRY

Mailing Address 1024 GETTYSVUE DRIVE

City	State	Zip Code
KNOXVILLE	TN	37922

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
B AND T DISTRIBUTING	PRESIDENT/PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.63571

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL HENTGES

Mailing Address 126 E 124TH ST S

City State Zip Code
JENKS OK 74037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HENTGES CONSULTING, LLC CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Transaction ID : SA17A.63705

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
JEAN HENZEL, JR.

Mailing Address 193 SOUTH UNION PARK DRIVE

City State Zip Code
PAYSON AZ 85541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CPL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.63723

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GARY HERBERT

Mailing Address 12626 HIGH BLUFF DR. #220

City State Zip Code
SAN DIEGO CA 92130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GARY A. HEERBERT CPA, INC. CPA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
214.16

Transaction ID : SA17A.63755

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
105.93

Subtotal Of Receipts This Page (optional).....▶ 655.93

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JACK HERETH

Mailing Address **2269 E CHEROKEE DR**

City **WOODSTOCK** State **GA** Zip Code **30188**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GIBSONBURG HEALTH,LLC** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.63787

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
MURRAY HERTZBERG

Mailing Address **15 THOMAS PLACE**

City **VALHALLA** State **NY** Zip Code **10595**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACE ENDICO CORP** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.64148

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
BEHROOZ HESHMATPOUR

Mailing Address **802 EAST JEFFERSON AVE**

City **EFFINGHAM** State **IL** Zip Code **62401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.64183

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....▶ **1250.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT HEUCK

Mailing Address 515 GARFIELD AVE.

City State Zip Code
MILFORD OH 45150

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 ▼
221.52

Transaction ID : SA17A.64284

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

121.52

B. Full Name (Last, First, Middle Initial)
DEWEY HEWITT

Mailing Address 2919 MELBOURNE TERRACE

City State Zip Code
MT JULIET TN 37122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CABLE N MORE CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
329.81

Transaction ID : SA17A.64327

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period

329.81

C. Full Name (Last, First, Middle Initial)
J.B. HICKS

Mailing Address 103 LEWELL ST

City State Zip Code
DALTON GA 30720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RANDLE SMITH AUTO SALES USED AUTO SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.64484

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 701.33

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LOU HIGGINBOTHAM

Mailing Address 4304 WESTWAY AVE.

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17A.64595

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value=""/> 1000.00

B. Full Name (Last, First, Middle Initial)
DENZLE HIGGINS

Mailing Address PO BOX 72403

City	State	Zip Code
FAIRBANKS	AK	99707

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BPXA	CIC INTERNAL EXECUTION PLANNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17A.64613

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value=""/> 1000.00

C. Full Name (Last, First, Middle Initial)
JOHN HIGGINS

Mailing Address 4456 S. LOWE

City	State	Zip Code
CHICAGO	IL	60609

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CHICAGO POLICE DEPARTMENT	SERGEANT OF POLICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 531.67

Transaction ID : SA17A.64620

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value=""/> 500.00

Subtotal Of Receipts This Page (optional)..... 2500.00

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)						PAGE 289 / 1212					
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN HIGGINS

Mailing Address **4456 S. LOWE**

City **CHICAGO** State **IL** Zip Code **60609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHICAGO POLICE DEPARTMENT** Occupation **SERGEANT OF POLICE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **631.67**

Transaction ID : SA17A.64621

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

100.00									
--------	--	--	--	--	--	--	--	--	--

B. Full Name (Last, First, Middle Initial)
JOHN HIGGINS

Mailing Address **4456 S. LOWE**

City **CHICAGO** State **IL** Zip Code **60609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CHICAGO POLICE DEPARTMENT** Occupation **SERGEANT OF POLICE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **731.67**

Transaction ID : SA17A.64622

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			17			2015			

Amount of Each Receipt this Period

100.00									
--------	--	--	--	--	--	--	--	--	--

C. Full Name (Last, First, Middle Initial)
BURL HILES

Mailing Address **203 FLOWER LANE DRIVE**

City **ESTILL SPRINGS** State **TN** Zip Code **37330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BURLS TERMITE** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **2700.00**

Transaction ID : SA17A.64721

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			21			2015			

Amount of Each Receipt this Period

2700.00									
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Subtotal Of Receipts This Page (optional).....▶ **2900.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAY HINKLE

Mailing Address 2018 VINE STREET

City State Zip Code
LOS ANGELES CA 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED ART DIRECTOR FOR MOTION PICTURES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65105

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM HINKLE

Mailing Address 6862 ALLIANCE LOOP

City State Zip Code
COLORADO SPRINGS CO 80925

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 : SA17A.65112

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM HINSON

Mailing Address 1907 E. DESOTO ST

City State Zip Code
PENSACOLA FL 32501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF MD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65144

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SEAN HINTZ

Mailing Address 1301 BAY RIDGE DRIVE
NONE

City State Zip Code
BENTON LA 71006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TANDEM ANESTHESIA CRNA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65165

Date of Receipt
M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER HISGEN

Mailing Address 848 NORTH RAINBOW BLVD 2408

City State Zip Code
LAST VEGAS NV 89107

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 ▼
201.00

Transaction ID : SA17A.65237

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
201.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER HISGEN

Mailing Address 848 NORTH RAINBOW BLVD 2408

City State Zip Code
LAST VEGAS NV 89107

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 ▼
286.28

Transaction ID : SA17A.65238

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
85.28

Subtotal Of Receipts This Page (optional).....▶ 536.28

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER HISGEN

Mailing Address **848 NORTH RAINBOW BLVD 2408**

City State Zip Code
LAST VEGAS NV 89107

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 ▼
343.38

Transaction ID : SA17A.65239

Date of Receipt

09 / 03 / 2015

Amount of Each Receipt this Period

57.10

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER HISGEN

Mailing Address **848 NORTH RAINBOW BLVD 2408**

City State Zip Code
LAST VEGAS NV 89107

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 ▼
410.48

Transaction ID : SA17A.65240

Date of Receipt

09 / 12 / 2015

Amount of Each Receipt this Period

67.10

C. Full Name (Last, First, Middle Initial)
DAN HOCHGREVE

Mailing Address **9693 TRITON CT**

City State Zip Code
MOBILE AL 36695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUNTINGTON INGALLS INDUSTRIES ENGINEERING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65375

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **374.20**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 293 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CHARLES HOCK		Transaction ID : SA17A.65397
Mailing Address 1000 MILLEDGE ROAD		Date of Receipt
City AUGUSTA State GA Zip Code 30904		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	<input type="text" value="250.00"/>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	<input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) BRYAN HODGES		Transaction ID : SA17A.65443
Mailing Address 8235 MIRAMAR WAY		Date of Receipt
City LAKEWOOD RANCH State FL Zip Code 34202		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer NETJETS	Occupation SALES	<input type="text" value="500.00"/>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	<input type="text" value="500.00"/>	

C. Full Name (Last, First, Middle Initial) DAVID HODSDON		Transaction ID : SA17A.65517
Mailing Address P.O. BOX 221		Date of Receipt
City YARMOUTHPORT State MA Zip Code 02675		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer ATLANTIC CAPE BUILDERS	Occupation CONTRACTOR	<input type="text" value="211.93"/>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	<input type="text" value="352.87"/>	

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD HOECK

Mailing Address **3439 BROOKSIDE RD
SUITE 108**

City **STOCKTON** State **CA** Zip Code **95219**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COLLIERS INTERNATIONAL** Occupation **REAL ESTATE PROFESSIONAL**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.65521

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period
209.69

B. Full Name (Last, First, Middle Initial)
GEOFFREY HOFFA

Mailing Address **3227 W. DONATELLO DRIVE**

City **PHOENIX** State **AZ** Zip Code **85086**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GEOFFREY W. HOFFA, PLLC** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65613

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GEOFFREY HOFFA

Mailing Address **3227 W. DONATELLO DRIVE**

City **PHOENIX** State **AZ** Zip Code **85086**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GEOFFREY W. HOFFA, PLLC** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.65614

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **709.69**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

 Use separate schedule(s)
for each category of the
Detailed Summary Page

 FOR LINE NUMBER:
(check only one)

PAGE 295 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

GEOFFREY HOFFA

Mailing Address 3227 W. DONATELLO DRIVE

City	State	Zip Code
PHOENIX	AZ	85086

FEC ID number of contributing federal political committee.

C

Name of Employer
GEOFFREY W. HOFFA, PLLCOccupation
CONSULTANT

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Transaction ID : SA17A.65615

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			06			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

GEOFFREY HOFFA

Mailing Address 3227 W. DONATELLO DRIVE

City	State	Zip Code
PHOENIX	AZ	85086

FEC ID number of contributing federal political committee.

C

Name of Employer
GEOFFREY W. HOFFA, PLLCOccupation
CONSULTANT

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

827.93

Transaction ID : SA17A.65616

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			06			2015			

Amount of Each Receipt this Period

77.93

C. Full Name (Last, First, Middle Initial)

HAROLD HOFFMAN

Mailing Address 35 MAGNOLIA LANE

City	State	Zip Code
WILDWOOD	FL	34785

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
SALES

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

232.54

Transaction ID : SA17A.65667

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

82.54

Subtotal Of Receipts This Page (optional).....

410.47

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 296 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HAROLD HOFFMAN

Mailing Address 35 MAGNOLIA LANE

City WILDWOOD State FL Zip Code 34785

FEC ID number of contributing federal political committee.

Name of Employer SELF Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.65668

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOHN HOFFMAN

Mailing Address 111 NEWBURY WAY

City DANVILLE State VA Zip Code 24541

FEC ID number of contributing federal political committee.

Name of Employer SELF Occupation CHIROPRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.65677

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ROBERT HOFSTETTER

Mailing Address 400 GANTTOEN RD

City SEWELL State NJ Zip Code 08080

FEC ID number of contributing federal political committee.

Name of Employer SELF Occupation DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.65744

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JACQUELYN P HOGGE

Mailing Address 108 GREENS WAY

City State Zip Code
WILLIAMSBURG VA 23185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RADIOLOGY ASSOCIATES OF RICHMOND RADIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
266.42

Transaction ID : SA17A.65784

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
266.42

B. Full Name (Last, First, Middle Initial)
KENNETH HOIER

Mailing Address 335 BRYN DRIVE

City State Zip Code
PEOSTA IA 52068

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 : SA17A.65827

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DANIEL HOLBROOK

Mailing Address 1332 SOUTH 163RD STREET

City State Zip Code
OMAHA NE 68130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED TECHNICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
317.23

Transaction ID : SA17A.65862

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
209.26

Subtotal Of Receipts This Page (optional).....▶ 725.68

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DANIEL HOLBROOK		Transaction ID : SA17A.65853	
Mailing Address 1332 SOUTH 163RD STREET		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2015	
City OMAHA	State NE	Zip Code 68130	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 87.54	
Name of Employer SELF EMPLOYED	Occupation TECHNICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 404.77	

B. Full Name (Last, First, Middle Initial) DANIEL HOLBROOK		Transaction ID : SA17A.65854	
Mailing Address 1332 SOUTH 163RD STREET		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2015	
City OMAHA	State NE	Zip Code 68130	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 110.66	
Name of Employer SELF EMPLOYED	Occupation TECHNICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 515.43	

C. Full Name (Last, First, Middle Initial) DANIEL HOLBROOK		Transaction ID : SA17A.65859	
Mailing Address 1332 SOUTH 163RD STREET		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2015	
City OMAHA	State NE	Zip Code 68130	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 292.29	
Name of Employer SELF EMPLOYED	Occupation TECHNICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 807.72	

Subtotal Of Receipts This Page (optional).....▶ 490.49

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
W F HOLDER II

Mailing Address **P O BOX 863**

City State Zip Code
LONG BEACH MS 39560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.F. HOLDER II LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.66

Transaction ID : SA17A.65922

Date of Receipt
M M / D D / Y Y Y Y
08 09 2015

Amount of Each Receipt this Period
97.57

B. Full Name (Last, First, Middle Initial)
W F HOLDER II

Mailing Address **P O BOX 863**

City State Zip Code
LONG BEACH MS 39560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.F. HOLDER II LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
329.47

Transaction ID : SA17A.65923

Date of Receipt
M M / D D / Y Y Y Y
09 01 2015

Amount of Each Receipt this Period
117.81

C. Full Name (Last, First, Middle Initial)
ANNIE HOLLAND

Mailing Address **P O BOX 2463**

City State Zip Code
FORT WORTH TX 76113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65956

Date of Receipt
M M / D D / Y Y Y Y
08 01 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **465.38**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAN HOLLAND

Mailing Address 118 PEARLE COVE DR

City State Zip Code
HUNTSVILLE AL 35806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IHSE USA MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.65962

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JULIA A HOLLAND

Mailing Address 7909 LONESOME DOVE LN

City State Zip Code
TALLAHASSEE FL 32311

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 : SA17A.65978

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JULIA A HOLLAND

Mailing Address 7909 LONESOME DOVE LN

City State Zip Code
TALLAHASSEE FL 32311

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 ▼
1250.00

Transaction ID : SA17A.65979

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JULIA A HOLLAND

Mailing Address 7909 LONESOME DOVE LN

City State Zip Code
TALLAHASSEE FL 32311

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 ▼
1276.82

Transaction ID : SA17A.65980

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
26.82

B. Full Name (Last, First, Middle Initial)
PETER HOLLAND

Mailing Address 350 MAIN ST

City State Zip Code
BOXFORD MA 01921

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 ▼
1000.00

Transaction ID : SA17A.66003

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VIOLA HOLLAND-CHRISTIANSON

Mailing Address 9737 S OSWEGO AVE

City State Zip Code
TULSA OK 74137

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 ▼
1000.00

Transaction ID : SA17A.66017

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 2026.82

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOSEPH HOLLEY		Transaction ID : SA17A.66048
Mailing Address 2402 SOUTH FORK DR		Date of Receipt
City PRATTVILLE State AL Zip Code 36067		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer VERSATILE SOLUTIONS, LLC	Occupation OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) D STEPHEN HOLLIS		Transaction ID : SA17A.66095
Mailing Address 1100 S. COLLEGE ST. STE. 108		Date of Receipt
City AUBURN State AL Zip Code 36832		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2700.00"/>
Name of Employer HOLLIS LASIK	Occupation LASIK EYE SURGEON	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>	

C. Full Name (Last, First, Middle Initial) RICHARD HOLMBERG		Transaction ID : SA17A.66165
Mailing Address 14943 HORSESHOE TRACE		Date of Receipt
City WELLINGTON State FL Zip Code 33414		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="306.71"/>
Name of Employer LOCKHEED MARTIN	Occupation GENERAL MANAGER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="306.71"/>	

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BONNIE HOLMES

Mailing Address **22465 SW 112TH AVE**

City State Zip Code
TUALATIN OR 97062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MY HUSBAND DOMESTIC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
228.31

Transaction ID : SA17A.66169

Date of Receipt
M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period
46.98

B. Full Name (Last, First, Middle Initial)
ROBERT HOMEYER

Mailing Address **51 WESCOTT CIRCLE**

City State Zip Code
TEWKSBURY MA 01876

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEYER CONSULTING SERVICES, INC. WATER CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.66363

Date of Receipt
M M / D D / Y Y Y Y
08 17 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KATHLEEN HOOVER

Mailing Address **3301 GLENDALE DRIVE**

City State Zip Code
BENSALEM PA 19020

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 : SA17A.66539

Date of Receipt
M M / D D / Y Y Y Y
08 04 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **546.98**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JASON HOPE

Mailing Address **14362 N FRANK LLOYD WRIGHT**

City **SCOTTSDALE** State **AZ** Zip Code **85260**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.66561

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
LINDSAY HOPE

Mailing Address **PO BOX 221454**

City **SIOUX FALLS** State **SD** Zip Code **57186**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.66563

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
JULIE HORTON

Mailing Address **125 SOUTH 1300 EAST**
15

City **SALT LAKE CITY** State **UT** Zip Code **84102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UTP** Occupation **STAGEHAND**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.66845

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **5650.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JULIE HORTON

Mailing Address 125 SOUTH 1300 EAST
15

City State Zip Code
SALT LAKE CITY UT 84102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UTP STAGEHAND

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
327.90

Transaction ID : SA17A.66846

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
77.90

B. Full Name (Last, First, Middle Initial)
C WILSON HOUSE

Mailing Address 2865 ANDREWS DRIVE

City State Zip Code
ATLANTA GA 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RFA MANAGEMENT PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.67031

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RAYMOND DOUGLAS HOUSER

Mailing Address 3901 TURTLE CREEK BLVD #16

City State Zip Code
DALLAS TX 75219

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 ▼
1000.00

Transaction ID : SA17A.67061

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 2077.90

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) SEAN HOUSTON		Transaction ID : SA17A.67083
Mailing Address 6926 MAPLERIDGE CIR NW		Date of Receipt MM / DD / YYYY 08 / 18 / 2015
City CANTON	State OH	Zip Code 44718
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer D'ANNIBALLE HOUSTON GROUP LLC	Occupation PARTNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) SEAN HOUSTON		Transaction ID : SA17A.67084
Mailing Address 6926 MAPLERIDGE CIR NW		Date of Receipt MM / DD / YYYY 08 / 18 / 2015
City CANTON	State OH	Zip Code 44718
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 26.55	
Name of Employer D'ANNIBALLE HOUSTON GROUP LLC	Occupation PARTNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 276.55	

C. Full Name (Last, First, Middle Initial) CAROL HOWE		Transaction ID : SA17A.67231
Mailing Address 9221 DOUTHAT STATE PARK RD.		Date of Receipt MM / DD / YYYY 09 / 21 / 2015
City MILLBORO	State VA	Zip Code 24460
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Subtotal Of Receipts This Page (optional).....	526.55
Total This Period (last page this line number only).....	

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT HOYT

Mailing Address **1812 BICKETT BLVD**

City	State	Zip Code
RALEIGH	NC	27608

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JPH HOLDINGS	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.67414

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
LOU HSU

Mailing Address **P.O. BOX 941549**

City	State	Zip Code
PLANO	TX	75094

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WKH,LLC	BUS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.67466

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
YICHAO HUANG

Mailing Address **1750 S FAIRFAX ST**

City	State	Zip Code
DENVER	CO	80222

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LITTLE OLLIES ASIAN CAFE	MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.67482

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1000.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
YICHAO HUANG

Mailing Address 1750 S FAIRFAX ST

City State Zip Code
DENVER CO 80222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LITTLE OLLIES ASIAN CAFE MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
564.69

Transaction ID : SA17A.67483

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
64.69

B. Full Name (Last, First, Middle Initial)
LOIS HUBBART

Mailing Address 5547 3RD ROAD

City State Zip Code
LAKE WORTH FL 33467

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 : SA17A.67517

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DAVID HUBER

Mailing Address 22REAR S PRINCE ST

City State Zip Code
LANCASTER PA 17603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF REALESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.67534

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 564.69

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GREG HUDSON

Mailing Address 3283 CAMINITO EASTBLUFF #196

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.67644

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial)
GREG HUDSON

Mailing Address 3283 CAMINITO EASTBLUFF #196

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.67645

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			19			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)
GREG HUDSON

Mailing Address 3283 CAMINITO EASTBLUFF #196

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.67646

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) GREG HUDSON Mailing Address 3283 CAMINITO EASTBLUFF #196 City LA JOLLA State CA Zip Code 92037 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation N/A Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 600.00		Transaction ID : SA17A.67647 Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2015 Amount of Each Receipt this Period 100.00
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B. Full Name (Last, First, Middle Initial) GREG HUDSON Mailing Address 3283 CAMINITO EASTBLUFF #196 City LA JOLLA State CA Zip Code 92037 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation N/A Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 700.00		Transaction ID : SA17A.67648 Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2015 Amount of Each Receipt this Period 100.00
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C. Full Name (Last, First, Middle Initial) DEREK HUESCHEN Mailing Address 36760 CENTRAL HWY City MONROE State NE Zip Code 68647 FEC ID number of contributing federal political committee. C Name of Employer DEREK HUESCHEN Occupation FARMER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 217.97		Transaction ID : SA17A.67718 Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2015 Amount of Each Receipt this Period 117.97
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Subtotal Of Receipts This Page (optional).....▶ **317.97**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES HUFF

Mailing Address 4506 WATAUGA ROAD

City	State	Zip Code
DALLAS	TX	75209

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
REATA PHARMACEUTICALS, INC.	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.67744

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	03	/	2015

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
ANDREW HUGHES

Mailing Address 2250 HARPER WOODS CT

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
THE PARISH BREWPUB	DISTRIBUTION LOGISTICS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.67817

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	23	/	2015

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
DEAN HUGHES

Mailing Address 633 SW 70 RD.

City	State	Zip Code
WALDRON	KS	67150

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.67850

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	21	/	2015

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1000.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK HUGHES

Mailing Address **PO BOX 772**

City State Zip Code
TAYLORVILLE IL 62568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DYNEGY COAL POWER MAINTAINCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.67921

Date of Receipt
M M / D D / Y Y Y Y
09 18 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARK HUGHES

Mailing Address **PO BOX 772**

City State Zip Code
TAYLORVILLE IL 62568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DYNEGY COAL POWER MAINTAINCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.67922

Date of Receipt
M M / D D / Y Y Y Y
09 18 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GERALD HUGO

Mailing Address **2294 HIWAN DR.**

City State Zip Code
EVERGREEN CO 80439

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 ▼
1000.00

Transaction ID : SA17A.68004

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **2000.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CURTIS HULIN

Mailing Address 2205 JANE ST.

City State Zip Code
NEW IBERIA LA 70563

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SUPERMARKET OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.68048

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CRAIG HULL

Mailing Address 804 MULBERRY STREET

City State Zip Code
BRADDYVILLE IA 51631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATELINE TRAILERS SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
220.73

Transaction ID : SA17A.68059

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CARL HULTMAN

Mailing Address 9683 BLILEY ROAD

City State Zip Code
WATERFORD PA 16441

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 ▼
340.00

Transaction ID : SA17A.68102

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period
175.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DEREK HUNTER

Mailing Address **770 EAST 61ST STREET
#4**

City **INDIANAPOLIS** State **IN** Zip Code **46220**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILLIAM ROAM** Occupation **SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
249.37

Transaction ID : SA17A.68334

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
108.67

B. Full Name (Last, First, Middle Initial)
DONALD HUPP

Mailing Address **2400 MARIKA CIR.**

City **WICHITA FALLS** State **TX** Zip Code **76308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GUNN OIL COMPANY** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.68422

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
THOMAS HURD

Mailing Address **4709 TALLEYBROOK DRIVE**

City **KENNESAW** State **GA** Zip Code **30152**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PAIN SOLUTIONS** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.68444

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **858.67**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) HENRY HURT Mailing Address 636 NORTH CAROLINA AVENUE SE City WASHINGTON State DC Zip Code 20003 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation N/A Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 149.60 Transaction ID : SA17A.68533 Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2015	
---	--

B. Full Name (Last, First, Middle Initial) DOUGLAS HUTTON Mailing Address 4317 STONEHILL CT City TEMPLE State TX Zip Code 76502 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 250.00 Transaction ID : SA17A.68704 Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2015	
--	--

C. Full Name (Last, First, Middle Initial) DOUGLAS HUTTON Mailing Address 4317 STONEHILL CT City TEMPLE State TX Zip Code 76502 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 41.89 Transaction ID : SA17A.68705 Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2015	
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Subtotal Of Receipts This Page (optional)..... **441.49**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE IANNATUONO

Mailing Address **282 LIONS WATCH DRIVE**

City State Zip Code
PASADENA MD 21122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHES COMMUNICATIONS GROUP, INC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.68825

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JESUS IGLESIAS

Mailing Address **540 CYPRESS POINTE DR E**

City State Zip Code
PEMBROKE PINES FL 33027

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 ▼
1000.00

Transaction ID : SA17A.68892

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JESUS IGLESIAS

Mailing Address **540 CYPRESS POINTE DR E**

City State Zip Code
PEMBROKE PINES FL 33027

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 ▼
1071.32

Transaction ID : SA17A.68893

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
71.32

Subtotal Of Receipts This Page (optional)..... **1571.32**

Total This Period (last page this line number only).....

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GARY IGO

Mailing Address 1230 CHEYENNE ST.

City	State	Zip Code
DOUGLAS	WY	82633

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 : SA17A.68901

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

_____	250.00
-------	--------

B. Full Name (Last, First, Middle Initial)
SHINJI IMOTO

Mailing Address 53 WISDOM QUEST RD.

City	State	Zip Code
BONNERS FERRY	ID	83805

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 ▼
 _____ 1000.00

Transaction ID : SA17A.68965

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

_____	1000.00
-------	---------

C. Full Name (Last, First, Middle Initial)
DEBBIE INMAN

Mailing Address 4748 SARAH ELIZABETH RD.

City	State	Zip Code
LINCOLNTON	NC	28092

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LINCOLNTON REHABILITATION CENTER	PHYSICAL THERAPIST ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 207.27

Transaction ID : SA17A.69079

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			22			2015			

Amount of Each Receipt this Period

_____	103.52
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Subtotal Of Receipts This Page (optional).....▶ **1353.52**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT IOLA

Mailing Address **6 HILLVIEW DR**

City State Zip Code
CALIFON NJ 07830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IOLA FINANCIAL GROUP, LLC WEALTH MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.69126

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BENJAMIN IRVINE

Mailing Address **3724 SE 16TH PL**

City State Zip Code
CAPE CORAL FL 33904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RELIABLE TURBINE MANAGER RGEN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.69206

Date of Receipt
M M / D D / Y Y Y Y
07 25 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BENJAMIN IRVINE

Mailing Address **3724 SE 16TH PL**

City State Zip Code
CAPE CORAL FL 33904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RELIABLE TURBINE MANAGER RGEN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
371.86

Transaction ID : SA17A.69207

Date of Receipt
M M / D D / Y Y Y Y
08 29 2015

Amount of Each Receipt this Period
121.86

Subtotal Of Receipts This Page (optional)..... **621.86**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
OFER IVAN

Mailing Address 1490 W WALNUT PARKWAY

City	State	Zip Code
RANCHO DOMINGUEZ	CA	90220

FEC ID number of contributing federal political committee.

Name of Employer PRICE POINT	Occupation CEO
---------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.69373

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

<input type="text" value="300.76"/>

B. Full Name (Last, First, Middle Initial)
OFER IVAN

Mailing Address 1490 W WALNUT PARKWAY

City	State	Zip Code
RANCHO DOMINGUEZ	CA	90220

FEC ID number of contributing federal political committee.

Name of Employer PRICE POINT	Occupation CEO
---------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.69374

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period

<input type="text" value="77.68"/>

C. Full Name (Last, First, Middle Initial)
TYLER JACK

Mailing Address 2180 S 1300 E
SUITE 590

City	State	Zip Code
SALT LAKE CITY	UT	84106

FEC ID number of contributing federal political committee.

Name of Employer FRONTLINE	Occupation BANKER
-------------------------------	----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.69479

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period

<input type="text" value="260.55"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TIMOTHY JACOBS

Mailing Address 3406 BROOKWOOD DRIVE

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUNTON & WILLIAMS LLP LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
219.50

Transaction ID : SA17A.69787

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period
119.50

B. Full Name (Last, First, Middle Initial)
TIMOTHY JACOBS

Mailing Address 3406 BROOKWOOD DRIVE

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUNTON & WILLIAMS LLP LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
309.69

Transaction ID : SA17A.69788

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Receipt this Period
90.19

C. Full Name (Last, First, Middle Initial)
TODD JAFFE

Mailing Address 8095 SPYGLASS HILL ROAD
101

City State Zip Code
MELBOURNE FL 32940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BREVARD PAIN MANAGEMENT PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.69907

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 459.69

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GAIL JAQUISH

Mailing Address 98 SAN JACINTO BLVD. FSR 1803

City	State	Zip Code
AUSTIN	TX	78701

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JURIX, INC.	PSYCHOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.70200

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
GAIL JARVIS

Mailing Address 46 TEETER ROCK RD.

City	State	Zip Code
TRUMBULL	CT	06611

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JARVIS CO.	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.70278

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			03			2015			

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
MIKEL JAYNES

Mailing Address 1244 FM 474

City	State	Zip Code
BOERNE	TX	78006

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 : SA17A.70385

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1500.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DOUGLAS JEFFERS

Mailing Address **7897 BROADWAY
UNIT 402**

City **SAN ANTONIO** State **TX** Zip Code **78209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JEFFERS INSURANCE AGENCY, INC.** Occupation **INSURANCE SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.70427

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CHAD JENKINS

Mailing Address **5983 DOWNINGTON POINT**

City **ACWORTH** State **GA** Zip Code **30101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BUCKHEAD RESIDENTIAL LLC** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
433.27

Transaction ID : SA17A.70507

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
302.10

C. Full Name (Last, First, Middle Initial)
ANNETTA JERNIGAN

Mailing Address **2328 E. LAKEVIEW AVE**

City **PENSACOLA** State **FL** Zip Code **32503**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.70750

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1552.10**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HUDSON JETER

Mailing Address 16967 OBSIDIAN CIRCLE

City	State	Zip Code
ATHENS	AL	35613

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LANDERS MCLARTY CHEVROLET	SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 205.68

Transaction ID : SA17A.70815

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
ALAN JOHNSON

Mailing Address 1374 SOUND FOREST DR

City	State	Zip Code
GULF BREEZE	FL	32563

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FEDEX	PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.71017

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			13			2015			

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
ALAN JOHNSON

Mailing Address 1374 SOUND FOREST DR

City	State	Zip Code
GULF BREEZE	FL	32563

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FEDEX	PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 281.67

Transaction ID : SA17A.71018

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period
 _____ 31.67

Subtotal Of Receipts This Page (optional).....▶ _____ 381.67

Total This Period (last page this line number only).....▶ _____

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

BEVERLY JOHNSON

Mailing Address PO BOX 166

City	State	Zip Code
HUNTINGTON	TX	75949

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71054

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)

DR CHAZ JOHNSON

Mailing Address 1853 ROCHESTER INDUSTRIAL CT

City	State	Zip Code
ROCHESTER HILLS	MI	48309

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NORTHERN STAMPINGS	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71172

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)

JASON JOHNSON

Mailing Address 1358 HOOPER AVE.
124

City	State	Zip Code
TOMS RIVER	NJ	08753

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SIMPLE HEALTHY LIFESTYL	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71284

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="67.89"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JASON JOHNSON		Transaction ID : SA17A.71285	
Mailing Address 1358 HOOPER AVE. 124		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2015	
City TOMS RIVER	State NJ	Zip Code 08753	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SIMPLE HEALTHY LIFESTYL	Occupation SALES		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="293.14"/>	
		Amount of Each Receipt this Period <input type="text" value="87.78"/>	

B. Full Name (Last, First, Middle Initial) JASON JOHNSON		Transaction ID : SA17A.71286	
Mailing Address 1358 HOOPER AVE. 124		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2015	
City TOMS RIVER	State NJ	Zip Code 08753	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SIMPLE HEALTHY LIFESTYL	Occupation SALES		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="329.81"/>	
		Amount of Each Receipt this Period <input type="text" value="36.67"/>	

C. Full Name (Last, First, Middle Initial) KENNETH JOHNSON		Transaction ID : SA17A.71359	
Mailing Address 136A PLEASANT HILL ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015	
City HARRISONBURG	State VA	Zip Code 22801	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>	

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENNETH JOHNSON

Mailing Address 136A PLEASANT HILL ROAD

City	State	Zip Code
HARRISONBURG	VA	22801

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71360

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

CONTRIBUTION REFUND

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
KL JOHNSON

Mailing Address 14052 N DOVE CANYON PASS

City	State	Zip Code
MARANA	AZ	85658

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71370

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
RANDY JOHNSON

Mailing Address PO BOX 1710

City	State	Zip Code
CULLMAN	AL	35056

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ALABAMA COAL COOPERATIVE	CEO / PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71547

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TIMOTHY JOHNSON

Mailing Address 2300 NE 62ND STREET

City State Zip Code
FORT LAUDERDALE FL 33308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JOHNSON & JOHNSON TEAM REALTY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.71662

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY JOHNSON

Mailing Address 2300 NE 62ND STREET

City State Zip Code
FORT LAUDERDALE FL 33308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JOHNSON & JOHNSON TEAM REALTY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313.45

Transaction ID : SA17A.71663

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2015

Amount of Each Receipt this Period
63.45

C. Full Name (Last, First, Middle Initial)
TOM JOHNSON

Mailing Address 2955 HERRING BROOK RD

City State Zip Code
EASTHAM MA 02642

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 ▼
291.80

Transaction ID : SA17A.71671

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period
170.91

Subtotal Of Receipts This Page (optional).....▶ 484.36

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WALLACE JOHNSON

Mailing Address 4216 PUNY PINAP PL

City	State	Zip Code
KOLOA	HI	96756

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GLOBAL AG	AGRICULTURE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.71696

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM JOHNSON

Mailing Address 350 SOUTH FIGUEROA STREET
190

City	State	Zip Code
LOS ANGELES	CA	90071

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JOHNSON & ASSOCIATES	LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.71727

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
DONALD JOHNSTON

Mailing Address 11071 TERRA BLANCA WAY

City	State	Zip Code
RANCHO CORDOVA	CA	95670

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 ▼
 _____ 1000.00

Transaction ID : SA17A.71773

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

_____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1500.00

Total This Period (last page this line number only).....▶ _____

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANDREW JOINER

Mailing Address 108 WYNFIELD DR

City TYRONE State GA Zip Code 30290

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71834

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RICHARD JOLLIFF

Mailing Address 3527 KAILUA LANE

City CHICO State CA Zip Code 95928

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71846

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BRIAN JONES

Mailing Address 540 MINNIE STREET

City PAYNESVILLE State MN Zip Code 56362

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.71915

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GUY JONES

Mailing Address **PO BOX Y**

City State Zip Code
SAN JOSE CA 95151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHANDAL BROS INC TRUCK DRIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.72032

Date of Receipt

07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
LISA BETHUNE JONES

Mailing Address **8640 CARBELLA CIRCLE**

City State Zip Code
MYRTLE BEACH SC 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WHOLESALE HOLIDAY RENTALS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.72123

Date of Receipt

07 / 31 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
LISA BETHUNE JONES

Mailing Address **8640 CARBELLA CIRCLE**

City State Zip Code
MYRTLE BEACH SC 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WHOLESALE HOLIDAY RENTALS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
442.80

Transaction ID : SA17A.72126

Date of Receipt

08 / 07 / 2015

Amount of Each Receipt this Period

192.80

Subtotal Of Receipts This Page (optional)..... **692.80**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LISA BETHUNE JONES

Mailing Address **8640 CARBELLA CIRCLE**

City **MYRTLE BEACH** State **SC** Zip Code **29579**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WHOLESALE HOLIDAY RENTALS** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
546.36

Transaction ID : SA17A.72127

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
103.56

B. Full Name (Last, First, Middle Initial)
LISA JONES

Mailing Address **9736 HWY 24 S.**

City **PARIS** State **TX** Zip Code **75462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HIRING PARTNERS, INC.** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.72125

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MICHAEL JONES

Mailing Address **1159 WASHINGTON DR**

City **MOODY** State **AL** Zip Code **35004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MEDICAL RESOURCES, INC.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.72167

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **603.56**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHANIE JONES

Mailing Address 2719 CAROLYN STREET

City	State	Zip Code
ASHLAND	KY	41102

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VECTRUS SYSTEM'S CORPORATION	DEFENSE CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72257

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			09			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
FR JOOS

Mailing Address 17 WHITE OAK CT.

City	State	Zip Code
WAS	IL	61571

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72326

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			30			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DENIS JORDAN

Mailing Address 2471 TOYON WAY

City	State	Zip Code
SAN BRUNO	CA	94066

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BBJ ELECTRIC INC	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72354

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WENDELL JORDAN

Mailing Address 205 E. 1ST

City	State	Zip Code
HICO	TX	76457

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 ▼

 210.18

Transaction ID : SA17A.72425

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period

<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
210.18

B. Full Name (Last, First, Middle Initial)
RYAN JOSEPH

Mailing Address 3511 RIVERCREST DR

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	BUSINESS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 325.57

Transaction ID : SA17A.72518

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period

<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
225.57

C. Full Name (Last, First, Middle Initial)
RICHARD JOVE

Mailing Address 9849 CARROTWOOD CIR

City	State	Zip Code
PORT SAINT LUCIE	FL	34987

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
VGTI FLORIDA	PROMINENT SCIENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 1000.00

Transaction ID : SA17A.72551

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
1000.00

Subtotal Of Receipts This Page (optional).....▶
1435.75

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HUGH JOYCE

Mailing Address 16463 WEST CRESCENT LANE

City State Zip Code
RICHMOND VA 23192

FEC ID number of contributing federal political committee.

Name of Employer Occupation
JAMES RIVER AIR CONDITIONING OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72568

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOSEPH KACZETOW

Mailing Address 15 CEDAR AVE

City State Zip Code
FARMINGDALE NY 11735

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72833

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MELVIN KAFTAN

Mailing Address 29100 NORTHWESTERN HWY STE 260

City State Zip Code
SOUTHFIELD MI 48034

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KAFTAN ENTERPRISES INC REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72889

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRITZ KAHLEY

Mailing Address **623 COBBLESTONE CIRCLE**

City State Zip Code
NORTH LITTLE ROCK AR 72116

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 : SA17A.72917

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID KAHN

Mailing Address **2011 COURTNEY ON DR**

City State Zip Code
HOUSTON TX 77042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOLES INC SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.72922

Date of Receipt
M M / D D / Y Y Y Y
08 25 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
HOWARD KAHN

Mailing Address **2702 HELBERG ROAD**

City State Zip Code
HOUSTON TX 77092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOWARD M. KAHN PC LONE STAR LAWYERS CO. CHIEF CUSTOM COUNSEL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.74

Transaction ID : SA17A.72929

Date of Receipt
M M / D D / Y Y Y Y
08 08 2015

Amount of Each Receipt this Period
135.74

Subtotal Of Receipts This Page (optional)..... **635.74**

Total This Period (last page this line number only).....

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

HOWARD KAHN

Mailing Address 2702 HELBERG ROAD

City HOUSTON State TX Zip Code 77092

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HOWARD M. KAHN PC LONE STAR LAWYER CHIEF CUSTOM COUNSEL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72930

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial)

GERALD KAISER

Mailing Address P. O. BOX 266

City TWO RIVERS State WI Zip Code 54241

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TRUE FOOD INTERNATIONAL VP NEW BUSINESS DEVELOPMENT - ASIA PAC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.72970

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)

JOSEPH KAMINKOW

Mailing Address 3750 LASVEGAS BLVD
3809

City LASVEGAS State NV Zip Code 89158

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ARISTOCRAT SR. VP GAME DESIGN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.73116

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

Subtotal Of Receipts This Page (optional).....▶

<input type="text" value="2900.00"/>

Total This Period (last page this line number only).....▶

<input type="text" value=""/>

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSHUA KANIK

Mailing Address **230 W HILL LN
APT 1**

City **WATERLOO** State **IA** Zip Code **50701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GRPC** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.88

Transaction ID : SA17A.73229

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
125.88

B. Full Name (Last, First, Middle Initial)
DHAWAL KAPADIA

Mailing Address **333 E 46TH STREET
6E**

City **NEW YORK** State **NY** Zip Code **10017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLACKROCK** Occupation **ASSOCIATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Transaction ID : SA17A.73260

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
160.00

C. Full Name (Last, First, Middle Initial)
DHAWAL KAPADIA

Mailing Address **333 E 46TH STREET
6E**

City **NEW YORK** State **NY** Zip Code **10017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLACKROCK** Occupation **ASSOCIATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
380.00

Transaction ID : SA17A.73261

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
140.00

Subtotal Of Receipts This Page (optional)..... **425.88**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DHAWAL KAPADIA		Transaction ID : SA17A.73262	
Mailing Address 333 E 46TH STREET 6E		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015	
City NEW YORK	State NY	Zip Code 10017	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer BLACKROCK	Occupation ASSOCIATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 480.00	

B. Full Name (Last, First, Middle Initial) DHAWAL KAPADIA		Transaction ID : SA17A.73263	
Mailing Address 333 E 46TH STREET 6E		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2015	
City NEW YORK	State NY	Zip Code 10017	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BLACKROCK	Occupation ASSOCIATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) DHAWAL KAPADIA		Transaction ID : SA17A.73264	
Mailing Address 333 E 46TH STREET 6E		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2015	
City NEW YORK	State NY	Zip Code 10017	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BLACKROCK	Occupation ASSOCIATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 520.00	

Subtotal Of Receipts This Page (optional)..... **140.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHAWN KARCH

Mailing Address 4224 GRADWOHL SWITCH ROAD

City State Zip Code
EASTON PA 18045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KARCH COMPANIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.20

Transaction ID : SA17A.73369

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
213.20

B. Full Name (Last, First, Middle Initial)
CARLOS KAUFFMANN

Mailing Address 545 REINANTE AV

City State Zip Code
CORAL GABLES FL 33156

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 ▼
1000.00

Transaction ID : SA17A.73646

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JAMES KAUFMAN

Mailing Address 3305 MATHIESON DR.

City State Zip Code
ATLANTA GA 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERRILL LYNCH FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.73654

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1463.20

Total This Period (last page this line number only).....▶

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES KAUFMAN

Mailing Address 3305 MATHIESON DR.

City	State	Zip Code
ATLANTA	GA	30305

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MERRILL LYNCH	FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.73655

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			25			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
MARYANN KAUFMAN

Mailing Address PO BOX L
136 CARBONDALE RD.

City	State	Zip Code
WAVERLY	PA	18471

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.73666

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			17			2015			

Amount of Each Receipt this Period

<input type="text" value="544.72"/>

C. Full Name (Last, First, Middle Initial)
DANIEL KEATING

Mailing Address 3112 SOUTH BIRMINGHAM AVE

City	State	Zip Code
TULSA	OK	74105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUMMIT CONSOLIDATED GROUP	INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.73862

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			21			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL KEELEY

Mailing Address **129 TOLL HOUSE RD
APT, C11**

City **GREENSBURG** State **PA** Zip Code **15601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STVINCENT** Occupation **CHEF**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.08

Transaction ID : SA17A.73955

Date of Receipt

08 / 25 / 2015

Amount of Each Receipt this Period

184.64

B. Full Name (Last, First, Middle Initial)
DENNIS KEETON

Mailing Address **3602 FM 2554**

City **IVANHOE** State **TX** Zip Code **75447**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **FARMING & RANCHING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.74013

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
ABRAHAM KEH

Mailing Address **P. O. BOX158**

City **MOUNTAIN VIEW** State **CA** Zip Code **94042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **REAL ESTATE MOBILE HOME PARKS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.74027

Date of Receipt

08 / 08 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **684.64**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL KELLER

Mailing Address 3531 CR 46A

City	State	Zip Code
AUBURN	IN	46706

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
STEEL DYNAMICS INC	FM OPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 514.08

Transaction ID : SA17A.74175

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	27	/	2015

Amount of Each Receipt this Period
 _____ 514.08

B. Full Name (Last, First, Middle Initial)
JEFF KELLOGG

Mailing Address 208 HIGHPOINT CIRCLE

City	State	Zip Code
VALLEY VIEW	TX	76272

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 ▼
 _____ 500.00

Transaction ID : SA17A.74331

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	04	/	2015

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER KELLY

Mailing Address 210 PADDOCK LANE

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
U.S. ANESTHESIA PARTNERS	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.74367

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	28	/	2015

Amount of Each Receipt this Period
 _____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 2014.08

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES KENNEDY

Mailing Address **55 COLONIAL DRIVE**

City **SHREWSBURY** State **MA** Zip Code **01545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FMC DEVENS** Occupation **PSYCHIATRIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.74676

Date of Receipt

08 / 10 / 2015

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
THOMAS KENT

Mailing Address **443 COUNTY ROAD**

City **CLIFFWOOD** State **NJ** Zip Code **07721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ELKEM INC** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.74821

Date of Receipt

09 / 03 / 2015

Amount of Each Receipt this Period

209.69

C. Full Name (Last, First, Middle Initial)
BRUCE KERZIC

Mailing Address **8 FLAGG WAY**

City **HILLSBOROUGH** State **NJ** Zip Code **08844**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THRIFT IINVESTMENT CORPORATION** Occupation **PRESIDENT/OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.74975

Date of Receipt

08 / 15 / 2015

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional)..... **1259.69**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JERRY KEY

Mailing Address 254 HWY 412 EAST

City	State	Zip Code
JACKSON	TN	38305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
KEY FIRE PROTECTION,INC	OWNER/ CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.75077

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
BECKY KIDD

Mailing Address 3516 BROOKLINE LANE

City	State	Zip Code
DALLAS	TX	75234

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 ▼
 _____ 436.65

Transaction ID : SA17A.75182

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			27			2015			

Amount of Each Receipt this Period
 _____ 348.71

C. Full Name (Last, First, Middle Initial)
BECKY KIDD

Mailing Address 3516 BROOKLINE LANE

City	State	Zip Code
DALLAS	TX	75234

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 ▼
 _____ 721.76

Transaction ID : SA17A.75183

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2015			

Amount of Each Receipt this Period
 _____ 285.11

Subtotal Of Receipts This Page (optional).....▶ _____ 883.82

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BECKY KIDD

Mailing Address 3516 BROOKLINE LANE

City	State	Zip Code
DALLAS	TX	75234

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 ▼
 _____ 1637.20

Transaction ID : SA17A.75184

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2015			

Amount of Each Receipt this Period
 _____ 915.44

B. Full Name (Last, First, Middle Initial)
R.STEFAN KIESZ

Mailing Address 40 ROGERS WOOD

City	State	Zip Code
SAN ANTONIO	TX	78248

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17A.75283

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			05			2015			

Amount of Each Receipt this Period
 _____ 2700.00

C. Full Name (Last, First, Middle Initial)
ANN KIEVIT

Mailing Address 29 DOGWOOD TRAIL

City	State	Zip Code
STOCKHOLM	NJ	07460

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 ▼
 _____ 202.64

Transaction ID : SA17A.75288

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

Amount of Each Receipt this Period
 _____ 63.81

Subtotal Of Receipts This Page (optional).....▶ _____ 3679.25

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EDWARD KIKER

Mailing Address 7357 WALL-TRIANA HWY

City State Zip Code
MADISON AL 35757

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 ▼
2700.00

Transaction ID : SA17A.75308

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
JAMES KILCHENMAN

Mailing Address 908 KINGS CROWN DR

City State Zip Code
SANIBEL FL 33957

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 : SA17A.75321

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DEAN KIMREY

Mailing Address 4862 84TH ST.

City State Zip Code
URBANDALE IA 50322

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 : SA17A.75497

Date of Receipt
M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 3100.00

Total This Period (last page this line number only).....▶

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. JAMES G KINCAID

Mailing Address 2805 E OAKLAND PARK BLVD

City State Zip Code
FORT LAUDERDALE FL 33306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.75511

Date of Receipt

M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JACK KING

Mailing Address 44 CRESTFIELD LANE

City State Zip Code
NORTH KINGSTOWN RI 02852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NATIONAL REFRIGERATION INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.75592

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
JACK KING

Mailing Address 44 CRESTFIELD LANE

City State Zip Code
NORTH KINGSTOWN RI 02852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NATIONAL REFRIGERATION INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
302.25

Transaction ID : SA17A.75593

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

52.25

Subtotal Of Receipts This Page (optional).....▶ 552.25

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN KING

Mailing Address 39 WILLIAM PENN RD

City	State	Zip Code
WARREN	NJ	07059

FEC ID number of contributing federal political committee. **C**

Name of Employer: **JESSY SEAFOODS**
Occupation: **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.75708

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
STEVEN KING

Mailing Address 39 WILLIAM PENN RD

City	State	Zip Code
WARREN	NJ	07059

FEC ID number of contributing federal political committee. **C**

Name of Employer: **JESSY SEAFOODS**
Occupation: **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.75709

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
THEODORE KING

Mailing Address 147 EAST SECOND AVENUE

City	State	Zip Code
ROCHELLE	IL	61068

FEC ID number of contributing federal political committee. **C**

Name of Employer: **CEDAR SIDING**
Occupation: **ACCOUNTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
327.93

Transaction ID : SA17A.75711

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period

327.93

Subtotal Of Receipts This Page (optional).....▶ **527.93**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THEODORE KING

Mailing Address **147 EAST SECOND AVENUE**

City **ROCHELLE** State **IL** Zip Code **61068**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CEDAR SIDING** Occupation **ACCOUNTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
834.06

Transaction ID : SA17A.75712

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
506.13

B. Full Name (Last, First, Middle Initial)
GEARY KINNETT

Mailing Address **950 RENAISSANCE WAY**

City **ROSWELL** State **GA** Zip Code **30076**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
218.69

Transaction ID : SA17A.75777

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
49.19

C. Full Name (Last, First, Middle Initial)
JAMES KIRBY

Mailing Address **13403 LAWSON RD**

City **LITTLE ROCK** State **AR** Zip Code **72210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
203.26

Transaction ID : SA17A.75887

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
203.26

Subtotal Of Receipts This Page (optional)..... **758.58**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DR. JOHN KIRIAKATIS

Mailing Address 1042 SALEM ROAD

City State Zip Code
UNION NJ 07083

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED DOCTOR OF CHIROPRACTIC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.75948

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ROGER KIRK

Mailing Address 1140 BIMINI LANE

City State Zip Code
RIVIERA BEACH FL 33404

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ADS INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.75974

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
AMANDA KIRKLAND

Mailing Address 105 ELBERTA STREET

City State Zip Code
MCDONOUGH GA 30253

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DARDEN RESTAURANTS BARTENDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.75993

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL KIRKLAND

Mailing Address **PO BOX 687**

City State Zip Code
NEW ALBANY OH 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMERGENCY BAIL BONDS PRIEST & LICENSED SURETY BAIL BOND A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.27

Transaction ID : SA17A.76010

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
159.27

B. Full Name (Last, First, Middle Initial)
DANNY KIRKPATRICK

Mailing Address **8409 EAST JUAN TABO RD**

City State Zip Code
SCOTTSDALE AZ 85255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GET OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.76022

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FRANCES KIRSCHNER

Mailing Address **1002 FAIR MEADOW DRIVE**

City State Zip Code
MASON CITY IA 50401

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 ▼
223.61

Transaction ID : SA17A.76074

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
31.67

Subtotal Of Receipts This Page (optional)..... **690.94**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CRAIG KIRSNER

Mailing Address 4935 PELICAN STREET

City State Zip Code
COCONUT CREEK FL 33073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STUART ESTATE PLANNING FINANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.76080

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RICK KISLING

Mailing Address 7825 DIVEN RD.

City State Zip Code
HILLSBORO OH 45133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED OWNER APPLIANCE AND ELECTRONIC STORE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.76117

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RONNIE KLATT

Mailing Address 4503 RIVER WOOD CT

City State Zip Code
AUSTIN TX 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAUREN CONCRETE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.76225

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD DONALD F KLEIN

Mailing Address **4200 WISCONSIN AVENUE NW; 106-200**

City **WASHINGTON** State **DC** Zip Code **20016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.76275

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
STEVE KLEIN

Mailing Address **7026 ST RD 311**

City **SELLERSBURG** State **IN** Zip Code **47172**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KLEIN HOMES** Occupation **SELF**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
321.48

Transaction ID : SA17A.76318

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

158.83

C. Full Name (Last, First, Middle Initial)
THOMAS KLEIN

Mailing Address **13116 REEDS ST**

City **OVERLAND PARK** State **KS** Zip Code **66209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.76322

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional)..... **1158.83**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID KLEINE

Mailing Address **659 ALNWICK COURT**

City **INVERNESS** State **IL** Zip Code **60010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE HIGHLAND GROUP** Occupation **SENIOR PARTNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.76334

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
DAVID KLEINE

Mailing Address **659 ALNWICK COURT**

City **INVERNESS** State **IL** Zip Code **60010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE HIGHLAND GROUP** Occupation **SENIOR PARTNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.76335

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
KIRK KLEISER

Mailing Address **212 SPYGLASS LN**

City **BROUSSARD** State **LA** Zip Code **70515**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **C STORE OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.76356

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **400.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL KLEMENTOVICH		Transaction ID : SA17A.76368																					
Mailing Address 111 PARK RIDGE DR		Date of Receipt																					
City BATH State PA Zip Code 18014		<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>15</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			15			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
09			15			2015																	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																					
Name of Employer ST LUKE'S HOSPITAL	Occupation CARDIOVASCULAR PERFUSIONIST	260.55																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 260.55																						

B. Full Name (Last, First, Middle Initial) JOSEPH KLEPAC		Transaction ID : SA17A.76374																					
Mailing Address 410 W 7TH ST 1624		Date of Receipt																					
City TULSA State OK Zip Code 74119		<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>28</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			28			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
07			28			2015																	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																					
Name of Employer NRG MANAGEMENT	Occupation PROJECT MANAGER	250.00																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00																						

C. Full Name (Last, First, Middle Initial) DAVID KLIMEK		Transaction ID : SA17A.76392																					
Mailing Address 1131 COUNTY ROAD KK		Date of Receipt																					
City MOSINEE State WI Zip Code 54455		<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>08</td><td></td><td></td><td>10</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			10			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			10			2015																	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																					
Name of Employer NORTHVIEW WINDOW & DOOR, LLC	Occupation OWNER	250.00																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00																						

Subtotal Of Receipts This Page (optional).....▶ **760.55**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ED KLINE

Mailing Address **240 WAVELAND AVE.**

City	State	Zip Code
GALLOWAY	NJ	08205

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
KLINE CONSTRUCTION	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.76415

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
LAWRENCE KLINE

Mailing Address **930 POCAHONTAS DR**

City	State	Zip Code
FORT WALTON BEACH	FL	32547

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	LANDLORD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.76417

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

_____ 500.00

C. Full Name (Last, First, Middle Initial)
JOHN KLOSAK

Mailing Address **2101 NICHOLAS COURT**

City	State	Zip Code
BETTENDORF	IA	52722

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PHYSICIAN	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17A.76507

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

_____ 2700.00

Subtotal Of Receipts This Page (optional).....▶ **3450.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MARILYN KLUBENSPIES		Transaction ID : SA17A.76527	
Mailing Address 25 KINGS HIGHWAY P.O. BOX 162		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015	
City CONGERS	State NY	Zip Code 10920	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	
		Amount of Each Receipt this Period <input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) CARL KLUG		Transaction ID : SA17A.76539	
Mailing Address 2380 OKLAHOMA AVE		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2015	
City ROCHESTER HIL	State MI	Zip Code 48309	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer MAGNA	Occupation ENGINEER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="300.00"/>	
		Amount of Each Receipt this Period <input type="text" value="100.00"/>	

C. Full Name (Last, First, Middle Initial) CARL KLUG		Transaction ID : SA17A.76540	
Mailing Address 2380 OKLAHOMA AVE		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2015	
City ROCHESTER HIL	State MI	Zip Code 48309	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer MAGNA	Occupation ENGINEER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="325.00"/>	
		Amount of Each Receipt this Period <input type="text" value="25.00"/>	

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CARL KLUG

Mailing Address 2380 OKLAHOMA AVE

City State Zip Code
ROCHESTER HIL MI 48309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAGNA ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17A.76541

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
CARL KLUG

Mailing Address 2380 OKLAHOMA AVE

City State Zip Code
ROCHESTER HIL MI 48309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAGNA ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
476.00

Transaction ID : SA17A.76542

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period
101.00

C. Full Name (Last, First, Middle Initial)
CARL KLUG

Mailing Address 2380 OKLAHOMA AVE

City State Zip Code
ROCHESTER HIL MI 48309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAGNA ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
526.00

Transaction ID : SA17A.76543

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2015

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 201.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT KLUTH

Mailing Address 175 E DELAWARE PLACE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COUPONCABIN.COM CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
447.76

Transaction ID : SA17A.76557

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period
298.39

B. Full Name (Last, First, Middle Initial)
KENT KNIGHT

Mailing Address 14 WOODY LANE

City State Zip Code
CABOT AR 72023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KNIGHTS INC. RETAIL FAMILY GROCER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.76711

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CINDY KNOX

Mailing Address 3015 E. JOYCE BLVD

City State Zip Code
FAYETTEVILLE AR 72703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CORNER K QUARTER HORSES. LLC AND
NMAA N HORSE BREEDER AND NEUROSURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.76825

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1048.39

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ELLE KOCH

Mailing Address **8198 DALEVIEW ROAD**

City State Zip Code
CINCINNATI OH 45247

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 ▼
229.51

Transaction ID : SA17A.76918

Date of Receipt
M M / D D / Y Y Y Y
09 15 2015

Amount of Each Receipt this Period
57.35

B. Full Name (Last, First, Middle Initial)
CHESTER KOERNER

Mailing Address **51 GRAND REGENCY CIR**

City State Zip Code
SPRING TX 77382

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NBCD INVESTMENTS INC SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.02

Transaction ID : SA17A.77073

Date of Receipt
M M / D D / Y Y Y Y
08 25 2015

Amount of Each Receipt this Period
265.02

C. Full Name (Last, First, Middle Initial)
CHESTER KOERNER

Mailing Address **51 GRAND REGENCY CIR**

City State Zip Code
SPRING TX 77382

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NBCD INVESTMENTS INC SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
515.02

Transaction ID : SA17A.77074

Date of Receipt
M M / D D / Y Y Y Y
08 25 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **572.37**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DARREN KOLBE

Mailing Address 409 E 7TH ST

City State Zip Code
FORT WORTH TX 76102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.77167

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
KEVIN KOPELMAN

Mailing Address 310 W 52ND ST
APT 15C

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KEVIN KOPELMAN ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
241.37

Transaction ID : SA17A.77372

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period

133.40

C. Full Name (Last, First, Middle Initial)
ART KORB

Mailing Address 2500 KALAKAUA AVE
APT #1502

City State Zip Code
HONOLULU HI 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOD DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.77414

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶ 5533.40

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LATISHA KORENGEL

Mailing Address 430 RIVER SUMMIT DR.

City State Zip Code
SIMPSONVILLE SC 29681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
212.12

Transaction ID : SA17A.77426

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

90.30

B. Full Name (Last, First, Middle Initial)
JOSEPH KORFF

Mailing Address 5310 N. OCEAN DR. #402

City State Zip Code
SINGER ISLAND FL 33404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ADMIRAL'S GROUP LLC CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.77436

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
YURY KORSHKOV

Mailing Address 9612 JORNEY CT

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KAISER PERMANENTE HOSPITAL PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.77499

Date of Receipt

M M / D D / Y Y Y Y
07 / 04 / 2015

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶ 5490.30

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANDY KOSKY

Mailing Address 1516 RICHLAND STREET

City	State	Zip Code
STORM LAKE	IA	50588

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NUTRA TECH	OWNER/MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.77540

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOY KOSSOUJI

Mailing Address 2609 HARLAN RD.

City	State	Zip Code
WAYNESVILLE	OH	45068

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GOLDEN TURTLE CHOCOLATE FACTORY	SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.77562

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN KOUNTZ

Mailing Address 1065 VAN DYKE DRIVE

City	State	Zip Code
LAGUNA BEACH	CA	92651

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 ▼

Transaction ID : SA17A.77654

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NICHOLAS KOZLOWSKI

Mailing Address 7378 WAR ROAD

City State Zip Code
NEWPORT MI 48166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FORD MOTOR COMPANY SKILLED TRADES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.91

Transaction ID : SA17A.77774

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
235.91

B. Full Name (Last, First, Middle Initial)
PETER KRAUSCH

Mailing Address 101 FREEMAN AVE

City State Zip Code
ISLIP NY 11751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
V&J AUTO BODY SHOP MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
247.47

Transaction ID : SA17A.77912

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
47.47

C. Full Name (Last, First, Middle Initial)
JOSEPH KRIVULKA

Mailing Address 11 COMMERCE DRIVE

City State Zip Code
CRANFORD NJ 07016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AKRIMAX PHARMACEUTICAL CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.78105

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **783.38**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSEPH KRIVULKA

Mailing Address 11 COMMERCE DRIVE

City State Zip Code
CRANFORD NJ 07016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AKRIMAX PHARMACEUTICAL CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.78106

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MEL KROGSENG

Mailing Address 45843 BIG EDDY ROAD

City State Zip Code
SOLDOTNA AK 99669

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 ▼
1000.00

Transaction ID : SA17A.78124

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JESSICA KROWIAK

Mailing Address 4018 WYNDWOOD DR.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAL MART SALES ASSOCIATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78187

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID KUBE

Mailing Address **2826 N. TALMAN AVE.**
UNIT H

City **CHICAGO** State **IL** Zip Code **60618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NMH** Occupation **RADIOGRAPHER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78341

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DONALD KUFRIN

Mailing Address **2293A VILLA DRIVE**

City **SISTER BAY** State **WI** Zip Code **54234**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78443

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MICHAEL KUHN

Mailing Address **10191 STATE ROUTE 3**

City **RED BUD** State **AK** Zip Code **62278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78471

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE KUNKEL

Mailing Address **45 QUEENS FOLLY RD**
580

City **HILTON HEAD** State **SC** Zip Code **29928**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78595

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JERRY KUNKEL

Mailing Address **1807 PULLIAM ST**

City **SAN ANGELO** State **TX** Zip Code **76905**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **OVER THE ROAD TRUCK DRIVER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78602

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
TROY KUPPER

Mailing Address **PO BOX 115**

City **RAY** State **ND** Zip Code **58849**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KUPPER FARMS** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.78651

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GEOFFREY KWITKO

Mailing Address 311 SOUTH MACDILL

City	State	Zip Code
TAMPA	FL	33609

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GEOFFREY M. KWITKO, M.D.	OCULOPLASTIC SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.78820

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

_____ 1000.00

B. Full Name (Last, First, Middle Initial)
PETER K KYTE

Mailing Address 1809 N HOYNE

City	State	Zip Code
CHICAGO	IL	60647

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TRG	REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 215.94

Transaction ID : SA17A.78859

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

_____ 107.97

C. Full Name (Last, First, Middle Initial)
RISTO LAAKSONEN

Mailing Address 9241 TIBET POINTE CIRCLE

City	State	Zip Code
WINDERMERE	FL	34786

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
UNIVERSAL NETWORK UNLIMITED, INC	EVP SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.78894

Date of Receipt

M M / D D / Y Y Y Y
09 / 06 / 2015

Amount of Each Receipt this Period

_____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 2107.97

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT LACEY

Mailing Address **5757 CYPRESS AVE**
145

City **CARMICHAEL** State **CA** Zip Code **95608**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.78968

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
KEVIN LAFLEUR

Mailing Address **4051 ROARING FORK DR**

City **LOVELAND** State **CO** Zip Code **80538**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COLORADO PREMIUM** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.79115

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ALDO LAGHI

Mailing Address **2895 42ND AVE NORTH**

City **ST PETERSBURG** State **FL** Zip Code **33714**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALPS SOUTH LLC** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.79151

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	5

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....▶ **1750.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 373 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial)**JOHN LAMBERT**

Mailing Address 8397 DRENA DRIVE

City	State	Zip Code
SHERRILLS FORD	NC	28673

FEC ID number of contributing
federal political committee.

C

Name of Employer
STONE RESTORATIONOccupation
OWNER

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.79347

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)**RENEE LAMBERT**

Mailing Address 228 ADAN AVE SW

City	State	Zip Code
NEW PHILADELPHIA	OH	44663

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLEVELAND VA MED CTROccupation
PHYSICIAN

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.79364

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)**KENNETH LANE**

Mailing Address 4409 CULBREATH AVENUE

City	State	Zip Code
TAMPA	FL	33609

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.79689

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....

1000.00

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SAUNDRA LANE

Mailing Address P.O. BOX 3430

City State Zip Code
BANDERA TX 78003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GERRY LANE ENTERPRISES MARKETING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.79719

Date of Receipt
MM / DD / YYYY
08 / 08 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER T LANGER

Mailing Address 567 BRYANT ST

City State Zip Code
WESTBURY NY 11590

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 ▼
217.02

Transaction ID : SA17A.79813

Date of Receipt
MM / DD / YYYY
08 / 08 / 2015

Amount of Each Receipt this Period
17.02

C. Full Name (Last, First, Middle Initial)
VINCE LANGFIELD

Mailing Address 10677 WEST TUFTS PLACE

City State Zip Code
LITTLETON CO 80127

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 : SA17A.79828

Date of Receipt
MM / DD / YYYY
09 / 17 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 517.02

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ARTHUR LANGLAIS

Mailing Address 78 CARDINAL WAY

City State Zip Code
SOUTH WINDSOR CT 06074

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LANGLAIS GROUP SALES & MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.79856

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
RICHARD LANNOM

Mailing Address 116 WATERFRONT DRIVE

City State Zip Code
CHESAPEAKE VA 23322

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.79946

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial)
ROY LARSEN

Mailing Address 642 NE 1ST STREET

City State Zip Code
BEND OR 97701

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.80193

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CLIFF LARSON

Mailing Address 6300 WESWTWOOD CT

City	State	Zip Code
EDINA	MN	55436

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.80205

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
ERIK LARSSON

Mailing Address 8741 SW 19TH AVE RD

City	State	Zip Code
OCALA	FL	34476

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNITED ROOFING OF CENTRAL FL INC.	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.80303

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial)
JEAN-PIERRE LASAGE-BISHOP

Mailing Address 2731 TALKEETNA AVENUE

City	State	Zip Code
FAIRBANKS	AK	99701

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	TRANSPORTATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.80324

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAUL LATOUR

Mailing Address 9434 GRAND ISLE CT.

City	State	Zip Code
HOUSTON	TX	77044

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	LANDLORD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.80467

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	09	/	2015

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
MR. PHILLIP LAUTNER

Mailing Address 33605 OLD PORTLAND ROAD

City	State	Zip Code
ADEL	IA	50003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LAUTNER FARMS	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Transaction ID : SA17A.80579

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	29	/	2015

Amount of Each Receipt this Period
 _____ 1500.00

C. Full Name (Last, First, Middle Initial)
MR. PHILLIP LAUTNER

Mailing Address 33605 OLD PORTLAND ROAD

City	State	Zip Code
ADEL	IA	50003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LAUTNER FARMS	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Transaction ID : SA17A.80580

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	29	/	2015

Amount of Each Receipt this Period
 _____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 3000.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TOMMY LAWHON

Mailing Address **950 CEDAR GROVE RD**
LOUDON

City **LOUDON** State **TN** Zip Code **37774**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VISKASE CORPORATION** Occupation **OPERATOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **221.93**

Transaction ID : SA17A.80674

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			16			2015			

Amount of Each Receipt this Period

87.83

B. Full Name (Last, First, Middle Initial)
SCOTT LAWSON

Mailing Address **1316 110TH ST.**

City **OLIN** State **IA** Zip Code **52320**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **265.57**

Transaction ID : SA17A.80821

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

97.54

C. Full Name (Last, First, Middle Initial)
WILLIAM LAWSON

Mailing Address **P O BOX 630**

City **BURGIN** State **KY** Zip Code **40310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KY DEPARTMENT OF REVENUE** Occupation **AUDITOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.80837

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **435.37**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HUONG LE

Mailing Address 122 CALDWELL AVENUE

City	State	Zip Code
BILOXI	MS	39530

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GOLDEN BAY INVEST., LTD	GENERAL PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17A.80942

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			21			2015			

Amount of Each Receipt this Period
 _____ 2700.00

B. Full Name (Last, First, Middle Initial)
DOROTHY B LEAMON

Mailing Address PO BOX 326

City	State	Zip Code
CLEMMONS	NC	27012

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DOROTHY'S TAX SERVICE INC	TAX PROFESSIONAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.81045

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
ROBERT LEBLANC

Mailing Address 3915 MEMBERS CLUB BLVD

City	State	Zip Code
SOUTHPORT	NC	28461

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 ▼
 _____ 500.00

Transaction ID : SA17A.81140

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			09			2015			

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 3450.00

Total This Period (last page this line number only).....▶ _____

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MIKE LECLEAR

Mailing Address 410

City	State	Zip Code
LYTLE	TN	38122

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.81185

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
BOBBY LEDBETTER

Mailing Address 1139THOMASON ROAD

City	State	Zip Code
ALBERTVILLE	AL	35951

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LEDBETTER ENTERPRIZE LLC	PRESDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.81203

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER LEE

Mailing Address 580 WASHINGTON ST PH E

City	State	Zip Code
BOSTON	MA	02111

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.81324

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **750.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CLARENCE V LEE III		Transaction ID : SA17A.81326	
Mailing Address 54 BUTTERNUT LANE		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2015	
City SOUTHPORT	State CT	Zip Code 06890	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 209.69	
Name of Employer ICON INTERNATIONAL INC	Occupation CFO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 209.69		

B. Full Name (Last, First, Middle Initial) PATRICK LEE		Transaction ID : SA17A.81424	
Mailing Address 600 W GOODALE ST APT 564		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015	
City COLUMBUS	State OH	Zip Code 43215	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.10	
Name of Employer CONSULTANT	Occupation CONSULTANT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 227.93		

C. Full Name (Last, First, Middle Initial) SAMUEL J LEE II		Transaction ID : SA17A.81476	
Mailing Address P.O. BOX 1818		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2015	
City ANGLETON	State TX	Zip Code 77516	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SAMUEL J LEE II	Occupation LAWYER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Subtotal Of Receipts This Page (optional).....▶ 521.79

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL LEMAN

Mailing Address **6 NESTLEWOOD PL**

City	State	Zip Code
SPRING	TX	77382

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MERRIMAC	CNC OPERATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.81757

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
MARCUS LEMON

Mailing Address **14 OAK HILL DRIVE**

City	State	Zip Code
LITITZ	PA	17543

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
POLSINELLI	SHAREHOLDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.81813

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
PAUL LEMON

Mailing Address **5412 WOODWAY DRIVE**

City	State	Zip Code
FORT WORTH	TX	76133

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
256.29

Transaction ID : SA17A.81815

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	1	5

Amount of Each Receipt this Period

256.29

Subtotal Of Receipts This Page (optional).....▶ 756.29

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GREGORY LENOX

Mailing Address **7665 WHITE POINT RD**

City **YONGES ISLAND** State **SC** Zip Code **29449**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **HOTEL INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period **500.00**

Transaction ID : SA17A.81877

Date of Receipt

08 / 07 / 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER LEONE

Mailing Address **20309 N. 96TH WAY**

City **SCOTTSDALE** State **AZ** Zip Code **85255**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period **500.00**

Transaction ID : SA17A.82028

Date of Receipt

08 / 14 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
NORBERT LESJAK

Mailing Address **644 FOREST BEND DRIVE**

City **PLANO** State **TX** Zip Code **75025**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **PIANO TECHNICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 Amount of Each Receipt this Period **300.00**

Transaction ID : SA17A.82129

Date of Receipt

09 / 24 / 2015

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....▶ **1100.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL LEVALLEY

Mailing Address 2415 PURCHASE ST.

City State Zip Code
NEW BEDFORD MA 02746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VALTRAN, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
312.04

Transaction ID : SA17A.82272

Date of Receipt

09 / 30 / 2015

Amount of Each Receipt this Period

212.04

B. Full Name (Last, First, Middle Initial)
MICHAEL LEVALLEY

Mailing Address 2415 PURCHASE ST.

City State Zip Code
NEW BEDFORD MA 02746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VALTRAN, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
376.10

Transaction ID : SA17A.82273

Date of Receipt

09 / 30 / 2015

Amount of Each Receipt this Period

64.06

C. Full Name (Last, First, Middle Initial)
BARRY LEVINE

Mailing Address 51 GIBRALTAR DRIVE
SUITE 2D

City State Zip Code
MORRIS PLAINS NJ 07950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
224.12

Transaction ID : SA17A.82347

Date of Receipt

08 / 17 / 2015

Amount of Each Receipt this Period

112.06

Subtotal Of Receipts This Page (optional)..... **388.16**

Total This Period (last page this line number only).....

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ARIANNA LEWIS

Mailing Address **1868 SHORE DRIVE SOUTH**
503

City: **SOUTH PASADENA** State: **FL** Zip Code: **33707**

FEC ID number of contributing federal political committee. **C**

Name of Employer: **TAMPABAYCNA.COM** Occupation: **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 231.52

Transaction ID : SA17A.82457

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
								131.52	

B. Full Name (Last, First, Middle Initial)
JILL LEWIS

Mailing Address **33 HAWTHORNE DRIVE**

City: **WESTFIELD** State: **NJ** Zip Code: **07090**

FEC ID number of contributing federal political committee. **C**

Name of Employer: **FOREVER COLLECTIBLES** Occupation: **MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 609.92

Transaction ID : SA17A.82540

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			30			2015			

Amount of Each Receipt this Period

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
								419.85	

C. Full Name (Last, First, Middle Initial)
KELLY LEWIS

Mailing Address **P.O. BOX 60**

City: **VELMA** State: **OK** Zip Code: **73491**

FEC ID number of contributing federal political committee. **C**

Name of Employer: **SELF EMPLOYED** Occupation: **OIL PRODUCTION**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 250.00

Transaction ID : SA17A.82554

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			09			2015			

Amount of Each Receipt this Period

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
								250.00	

Subtotal Of Receipts This Page (optional).....▶

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
								801.37	

Total This Period (last page this line number only).....▶

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) WILLIAM J LEWIS JR.		Transaction ID : SA17A.82613	
Mailing Address 13 SUNSET AVE		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015	
City NORTH READING	State MA	Zip Code 01864	Amount of Each Receipt this Period 32.10
FEC ID number of contributing federal political committee. C	Occupation RETIRED		
Name of Employer RETIRED	Election Cycle-to-Date ▼ 232.10		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) LAN LI		Transaction ID : SA17A.82651	
Mailing Address 13946 SADDLEVIEW DR		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2015	
City NORTH POTOMAC	State MD	Zip Code 20878	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation SELF EMPLOYED		
Name of Employer SELF EMPLOYED	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) MICHAEL LIDEN		Transaction ID : SA17A.82715	
Mailing Address 324. SHERIDAN ST		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2015	
City CROOKSTON	State MN	Zip Code 56716	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation RETIRED		
Name of Employer RETIRED	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....	532.10
Total This Period (last page this line number only).....	

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) PAMELA LIEBMAN		Transaction ID : SA17A.82747	
Mailing Address 9 STRATFORD COURT		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2015	
City WARREN	State NJ	Zip Code 07059	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 260.55	
Name of Employer THE CORCORAN GROUP	Occupation REAL ESTATE	Election Cycle-to-Date 260.55	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) THOMAS LIESER		Transaction ID : SA17A.82777	
Mailing Address 11525 LOWELL AVE		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015	
City OVERLAND PARK	State KS	Zip Code 66210	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer J J PRINTING	Occupation SALES	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) JOSEPH LIGMAN		Transaction ID : SA17A.82821	
Mailing Address 9841 SW 157 TERRACE		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015	
City MIAMI	State FL	Zip Code 33157	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer LIGMAN MARTIN PL	Occupation ATTORNEY	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ 760.55

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID LILJENQUIST

Mailing Address 10722 PINEY ISLAND DRIVE

City State Zip Code
BISHOPVILLE MD 21813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARK DOUGLAS LTD. RETAILER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
203.11

Transaction ID : SA17A.82852

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
103.11

B. Full Name (Last, First, Middle Initial)
CLAIRE LILLARD

Mailing Address P O BOX 1648

City State Zip Code
BAYTOWN TX 77522-1648

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 ▼
266.97

Transaction ID : SA17A.82863

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period
85.30

C. Full Name (Last, First, Middle Initial)
PETE LILLO

Mailing Address 102 GRAHAM RD.
102 GRAHAM RD.

City State Zip Code
CUYAHOGA FALLS OH 44223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED PRINT MARKETER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.82881

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1188.41

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WAYNE LIMBRIGHT

Mailing Address 1742 WIXOM ROAD

City	State	Zip Code
WIXOM	MI	48393

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AIC EQUIPMENT	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.82913

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MARK LINAWEAVER

Mailing Address 24583 147TH

City	State	Zip Code
LEAVENWORTH	KS	66048

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LINAWEAVER CONST., INC	V.P.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.82941

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL LIND

Mailing Address 762 YOUNT ST.

City	State	Zip Code
SONOMA	CA	95476

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.82956

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 390 / 1212

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

WAYNE LINDSEY

Mailing Address 3121 COUNTRY CLUB DRIVE

City	State	Zip Code
LYNN HAVEN	FL	32444

FEC ID number of contributing federal political committee.

C

Name of Employer
COASTAL SOUTHERN INCOccupation
RESTAURANT OWNER

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.83074

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08		/	21		/	2015			

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

JOHNNY LINDSTOM

Mailing Address 647 MARINE DR

City	State	Zip Code
PORT ANGELES	WA	98363

FEC ID number of contributing federal political committee.

C

Name of Employer
JYCOLEOccupation
MANAGER

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.83080

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07		/	31		/	2015			

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

SHANE LINSE

Mailing Address 3429 PRESTWICK RD

City	State	Zip Code
BILLINGS	MT	59101

FEC ID number of contributing federal political committee.

C

Name of Employer
BIG SKY COMMUNICATION & CABLE, INC.Occupation
TELECOMMUNICATIONS CONTRACTOR

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.83173

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08		/	07		/	2015			

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....

4200.00

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EDWARD LIPPERT III

Mailing Address 8296 IRIS ST.

City ARVADA State CO Zip Code 80005

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.83235

Date of Receipt

08 / 24 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
EVA LISCO

Mailing Address 126 COUNTY ROAD 318

City CLEVELAND State TX Zip Code 77327

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
244.24

Transaction ID : SA17A.83258

Date of Receipt

08 / 16 / 2015

Amount of Each Receipt this Period

144.24

C. Full Name (Last, First, Middle Initial)
EVA LISCO

Mailing Address 126 COUNTY ROAD 318

City CLEVELAND State TX Zip Code 77327

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
388.45

Transaction ID : SA17A.83259

Date of Receipt

08 / 26 / 2015

Amount of Each Receipt this Period

144.21

Subtotal Of Receipts This Page (optional)..... **538.45**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EVA LISCO

Mailing Address 126 COUNTY ROAD 318

City	State	Zip Code
CLEVELAND	TX	77327

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 ▼
 _____ 432.73

Transaction ID : SA17A.83260

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

_____ 44.28

B. Full Name (Last, First, Middle Initial)
EVA LISCO

Mailing Address 126 COUNTY ROAD 318

City	State	Zip Code
CLEVELAND	TX	77327

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 ▼
 _____ 518.06

Transaction ID : SA17A.83261

Date of Receipt

M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period

_____ 85.33

C. Full Name (Last, First, Middle Initial)
WILLIAM LIVORE

Mailing Address 145 BERRY HILLRD

City	State	Zip Code
SYOSSET	NY	11791

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
VILLAGE AUTO BODY	MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.83461

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 379.61

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHEN LOCKE

Mailing Address 15 CRANE RD

City	State	Zip Code
LLOYD HARBOR	NY	11743

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
COLONIAL SPRINGS GOLF CLUB	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.83579

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			22			2015			

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
LISA LOCONTI

Mailing Address 8140 MOUNT ROYAL DRIVE

City	State	Zip Code
CONCORD TWP	OH	44077

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 307.52

Transaction ID : SA17A.83626

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			27			2015			

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
WENDY LOKKEN

Mailing Address 206 MILL STREET

City	State	Zip Code
ROCHESTER	MI	48307

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
IDS.COM INTELLEGENT DOCUMENT SOLUTIONS	PRESIDENT/OWNER/SHAREHOLDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.83775

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1000.00

Total This Period (last page this line number only).....▶ _____

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RUSSELL LONGMIRE

Mailing Address **5514 COURT OF YORK**

City **HOUSTON** State **TX** Zip Code **77069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LSNA ENERGY GROUP** Occupation **LAND MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **220.00**

Transaction ID : SA17A.84001

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
RUSSELL LONGMIRE

Mailing Address **5514 COURT OF YORK**

City **HOUSTON** State **TX** Zip Code **77069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LSNA ENERGY GROUP** Occupation **LAND MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **245.00**

Transaction ID : SA17A.84002

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			02			2015			

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
RUSSELL LONGMIRE

Mailing Address **5514 COURT OF YORK**

City **HOUSTON** State **TX** Zip Code **77069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LSNA ENERGY GROUP** Occupation **LAND MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **270.00**

Transaction ID : SA17A.84003

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

25.00

Subtotal Of Receipts This Page (optional)..... **75.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENNETH LORICK

Mailing Address 136 RAVENSWOOD CRT

City State Zip Code
JOPPA MD 21085

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 ▼
500.00

Transaction ID : SA17A.84275

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ALLEN LOVE

Mailing Address 526 FIFTH STREET

City State Zip Code
MARIETTA OH 45750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAGNUM MAGNETICS CORPORATION CEO (OWNER)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.84414

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
DENNIS L LOWDER

Mailing Address 13204 N MACARTHUR BLVD

City State Zip Code
OKLAHOMA CITY OK 73142

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 ▼
500.00

Transaction ID : SA17A.84540

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3700.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JACQUELINE LOYD

Mailing Address **77552 MAHOGANY STREET**

City State Zip Code
SILVER LAKE OR 97638

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 ▼
500.00

Transaction ID : SA17A.84674

Date of Receipt
M M / D D / Y Y Y Y
08 21 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LI ZHEN LU

Mailing Address **417 W COIUMBIA RD**

City State Zip Code
THOUSAND OAKS CA 91360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YI NI INTERNATIONAL CORP. THERAPIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.24

Transaction ID : SA17A.84695

Date of Receipt
M M / D D / Y Y Y Y
08 11 2015

Amount of Each Receipt this Period
205.24

C. Full Name (Last, First, Middle Initial)
CONNIE LUEBBE

Mailing Address **401 APPLE BLOSSOM RD**

City State Zip Code
PATASKALA OH 43062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LUEBBE FINE HOMES GENERAL CONTRATOR/HOME BUILDER & REMOD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.84896

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **955.24**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFF LUKENS

Mailing Address **37 HARRIS AVE**

City	State	Zip Code
RAVENA	NY	12143

FEC ID number of contributing federal political committee. **C**

Name of Employer LUKENS	Occupation LUKENS
-----------------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

257.70

Transaction ID : SA17A.84998

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

88.56

B. Full Name (Last, First, Middle Initial)
AMY LUMET

Mailing Address **447 N DOHENY DR**
205

City	State	Zip Code
BEVERLY HILLS	CA	90210

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation FILM PRODUCER
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.85020

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
CULLEN LUNDY

Mailing Address **500 STATE ST.**

City	State	Zip Code
CARTHAGE	NY	13619

FEC ID number of contributing federal political committee. **C**

Name of Employer LUNDY FUNERAL HOME & CREMATION SERVICE	Occupation FUNERAL DIRECTOR
---	---------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

203.12

Transaction ID : SA17A.85081

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

203.12

Subtotal Of Receipts This Page (optional).....
791.68

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL LUNDY

Mailing Address 10 BRIDGETON WAY

City	State	Zip Code
HOPKINTON	MA	01748

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ORACLE	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.85083

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ELISE LUONG

Mailing Address 22 WAYRIDGE COURT

City	State	Zip Code
MONTGOMERY VILLAGE	MD	20886

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
THE FOOD AND DRUG ADMINISTRATION	CHEMIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.85113

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ELISE LUONG

Mailing Address 22 WAYRIDGE COURT

City	State	Zip Code
MONTGOMERY VILLAGE	MD	20886

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
THE FOOD AND DRUG ADMINISTRATION	CHEMIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149692

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Redesignate:

Amount of Each Receipt this Period

[MEMO ITEM]

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ELISE LUONG

Mailing Address **22 WAYRIDGE COURT**

City State Zip Code
MONTGOMERY VILLAGE MD 20886

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE FOOD AND DRUG ADMINISTRATION CHEMIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149693

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Redesignate: GENERAL 2016

Amount of Each Receipt this Period
33.13

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
RICHARD LUTHMANN

Mailing Address **1811 VICTORY BOULEVARD**

City State Zip Code
STATEN ISLAND NY 10314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
258.83

Transaction ID : SA17A.85187

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Receipt this Period
158.83

C. Full Name (Last, First, Middle Initial)
DALE AND SANDRA LUTZ

Mailing Address **701 S. OLIVE AVE #1427**

City State Zip Code
WEST PALM BEACH FL 33401

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 ▼
1000.00

Transaction ID : SA17A.85202

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1158.83**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GREIG LUTZ

Mailing Address **206 WEST OAKLAND AVE**

City OAKLAND	State NJ	Zip Code 07436
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer OAKLAND MARINE AND EQUIPMENT INC	Occupation PRES
---	---------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.85204

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
WALTER LUTZ

Mailing Address **2467 HALL ROAD**

City HARTFORD	State WI	Zip Code 53027
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.85220

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
ROGER LYNBERG

Mailing Address **7 SIXPENCE WAY**

City CORONADO	State CA	Zip Code 92118
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.85287

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional)..... **3950.00**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KIERA LYNCH

Mailing Address 10 CAT ROCK ROAD

City State Zip Code
COS COB CT 06807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.85335

Date of Receipt
MM / DD / YYYY
09 / 16 / 2015

Amount of Each Receipt this Period
209.69

B. Full Name (Last, First, Middle Initial)
MIKE LYNCH

Mailing Address 64 STRADA PRINCIPALE #209
209

City State Zip Code
HENDERSON NV 89011

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 ▼
225.00

Transaction ID : SA17A.85349

Date of Receipt
MM / DD / YYYY
09 / 17 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY J LYNG

Mailing Address 12227 GLADEWICK DR

City State Zip Code
HOUSTON TX 77077

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HVI ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.85385

Date of Receipt
MM / DD / YYYY
09 / 24 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1309.69

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LOIS LYNN

Mailing Address **222 RIVERSIDE DRIVE
APT 8E**

City **NEW YORK** State **NY** Zip Code **10025**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NOVEN** Occupation **COMPUTER PROGRAMMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.85403

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
SYBIL LYNN

Mailing Address **27 EAGLE DRIVE**

City **JESUP** State **GA** Zip Code **31546**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.85420

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
MILENA LYONS

Mailing Address **8005 A1A SOUTH**

City **ST AUGUSTINE** State **FL** Zip Code **32080**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CMG** Occupation **MARKETING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
322.72

Transaction ID : SA17A.85457

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
322.72

Subtotal Of Receipts This Page (optional)..... **3283.27**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT LYONS

Mailing Address PO BOX 950273

City	State	Zip Code
LAKE MARY	FL	32795

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation
UPS	DRIVER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
217.45

Transaction ID : SA17A.85472

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			05			2015			

Amount of Each Receipt this Period
103.11

B. Full Name (Last, First, Middle Initial)
DIANE MACDONALD

Mailing Address 8412 EL PESCADOR LANE

City	State	Zip Code
LA PALMA	CA	90623

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation
DELTA DENTAL OF CALIFORNIA	MANAGER, IT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.85569

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			26			2015			

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PAUL MAC DONALD

Mailing Address 9125 S. VIRGINIA ST

City	State	Zip Code
RENO	NV	89511

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation
SIERRA RV SUPER CENTER	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.85533

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... 603.11

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT MACKIEWICZ

Mailing Address **25 EAST 40TH STREET
1ST FLOOR**

City **BAYONNE** State **NJ** Zip Code **07002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BAYONNE FIRE DEPT** Occupation **FIREFIGHTER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
438.62

Transaction ID : SA17A.85758

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period
278.62

B. Full Name (Last, First, Middle Initial)
WILLIAM J MACKIN

Mailing Address **43 RAMBLER ROAD**

City **CARMEL** State **NY** Zip Code **10512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED BUSINESS** Occupation **DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.85762

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
WILLIAM J MACKIN

Mailing Address **43 RAMBLER ROAD**

City **CARMEL** State **NY** Zip Code **10512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED BUSINESS** Occupation **DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2858.40

Transaction ID : SA17A.85763

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
158.40

Subtotal Of Receipts This Page (optional)..... **3137.02**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ROGER MACLEOD		Transaction ID : SA17A.85798	
Mailing Address 4613 SHADYCREEK LANE		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2015	
City COLLEYVILLE	State TX	Zip Code 76034	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00	
Name of Employer LOCKHEED MARTIN MISSILES AND FIRE CO	Occupation INTERNATIONAL BUSINESS DEVELOPMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) ROBERT MAC WILLIAM		Transaction ID : SA17A.85539	
Mailing Address 70 DAVIES AVE		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015	
City DUMONT	State NJ	Zip Code 07628	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00	
Name of Employer PTL SHEETMETAL	Occupation SKETCHER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) ELIZABETH MADAY		Transaction ID : SA17A.85894	
Mailing Address 2711 VERONA TERRACE		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
City MISSION HILLS	State KS	Zip Code 66208	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		236.29	
Name of Employer SPECHEM LLC	Occupation CO-OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 236.29		

Subtotal Of Receipts This Page (optional).....▶ 736.29

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN MADDOX

Mailing Address 101 DALTON PLACE WAY

City State Zip Code
KNOXVILLE TN 37912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MADDOX PROPERTIES REAL ESTATE DEVELOPMENT, CONST. ANI

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.85945

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STEPHEN MADIGAN

Mailing Address 1 MADIGANS WAY

City State Zip Code
FALMOUTH ME 04105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOWN EAST COMMUNITY HOSPITAL RADIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.85975

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES SCOTTI MADISON

Mailing Address 3330 COBB PARKWAY
SUITE 324-354

City State Zip Code
ACWORTH GA 30101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.85981

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN MADISON

Mailing Address 600 TATUM CAMP RD.

City State Zip Code
PURVIS MS 39475

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BREITBURN ENERGY PARTNERS LLC DRILLING SUPT.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.85987

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RODNEY MAEL

Mailing Address 14416 SE 142ND PLACE

City State Zip Code
RENTON WA 98059

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 : SA17A.86024

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DR STEVEN MAGAZINER

Mailing Address 4212 BLACK HORSE PIKE

City State Zip Code
MAYS LANDING NJ 08330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.86079

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MAIA MAGEE

Mailing Address **21 MOHAWK TRAIL
PMB 169**

City **GREENFIELD** State **MA** Zip Code **01301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.86087

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
RYAN MAHER

Mailing Address **117 NORTH MAIN STREET**

City **ISABEL** State **SD** Zip Code **57633**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **RESTAURANT OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.86245

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
STEVEN MAIROSE

Mailing Address **2809 EAST HAYSTACKER DR.**

City **EAGLE** State **CO** Zip Code **81631**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FEDEX** Occupation **PILOT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.86361

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **2500.00**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTO AND SUSAN MAKRIDES

Mailing Address 102 AVERY DR

City	State	Zip Code
ATLANTA	GA	30309

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BUCKHEAD LIFE RESTAURANT GROUP	CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.86430

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

_____	250.00
-------	--------

B. Full Name (Last, First, Middle Initial)
CHRISTO AND SUSAN MAKRIDES

Mailing Address 102 AVERY DR

City	State	Zip Code
ATLANTA	GA	30309

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BUCKHEAD LIFE RESTAURANT GROUP	CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.86431

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

_____	250.00
-------	--------

C. Full Name (Last, First, Middle Initial)
UDAYAN MALLIK

Mailing Address 2301 GLENALLAN AVENUE
414

City	State	Zip Code
SILVER SPRING	MD	20906

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NASA	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.86581

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period

_____	500.00
-------	--------

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 410 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial)**JOSEPH MALLON**

Mailing Address 21472 TOWERGUARD DR. S.

City	State	Zip Code
KINGWOOD	TX	77339

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.86588

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)**MS. ANGELA R MANN**

Mailing Address 20114 N KEY DRIVE

City	State	Zip Code
BOCA RATON	FL	33498

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.86914

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)**TERRY MANSFIELD**

Mailing Address 403 WEST CHURCH STREET

City	State	Zip Code
ELMIRA	NY	14904

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.87075

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		20		2015

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....

1250.00

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VALERIE MANTOS

Mailing Address 915 AMANDA DRIVE

City State Zip Code
MANSFIELD TX 76063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LONE STAR AVIATION PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.87117

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SIDNEY MARCHAND

Mailing Address 640 KENNEDY DRIVE

City State Zip Code
BEAUMONT TX 77706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.87238

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ANNMARIE MARCHETTA

Mailing Address 5200 NEWSTEAD MANOR LANE

City State Zip Code
RALEIGH NC 27606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED E-COMMERCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
312.61

Transaction ID : SA17A.87242

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
312.61

Subtotal Of Receipts This Page (optional).....▶ 1562.61

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MATT MARIANI

Mailing Address **34815 SE SCOTT ST**

City State Zip Code
SNOQUALMIE WA 98065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PCH REPS SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
222.26

Transaction ID : SA17A.87410

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

222.26

B. Full Name (Last, First, Middle Initial)
ANTHONY & JULIA MARLOWE

Mailing Address **2310 LAKE RIDGE PL NE**

City State Zip Code
NORTH LIBERTY IA 52317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTREPRENEUR EXECUTIVE, FOUNDER, AND OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
590.06

Transaction ID : SA17A.87671

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

590.06

C. Full Name (Last, First, Middle Initial)
THOMAS MAROTTA

Mailing Address **2320 NE 34TH COURT**

City State Zip Code
LIGHTHOUSE POINT FL 33064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAROTTA CONTROLS, INC EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.87707

Date of Receipt

08 / 07 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **1062.32**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 413 / 1212

<input type="checkbox"/> 16	<input checked="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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) TYE MARQUARDT		Transaction ID : SA17A.87723
Mailing Address 1135 BROADWAY ST		Date of Receipt MM / DD / YYYY 08 / 17 / 2015
City HOLDREGE	State NE	Zip Code 68949
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer WESTERLIN HARRINGTON FLYING SERVICE	Occupation LABORER	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2700.00	

B. Full Name (Last, First, Middle Initial) TOM MARTIGNETTI		Transaction ID : SA17A.88046
Mailing Address 10 KIRBY ROAD		Date of Receipt MM / DD / YYYY 07 / 03 / 2015
City WASHINGTON	State CT	Zip Code 06793
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF EMPLOYED	Occupation HOSPITALITY	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) JAMES MARTIN		Transaction ID : SA17A.88188
Mailing Address 3995 PRAIRIE DUNES DR		Date of Receipt MM / DD / YYYY 07 / 07 / 2015
City SARASOTA	State FL	Zip Code 34238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JAMES H MARTIN DC PC	Occupation DIRECTOR	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Subtotal Of Receipts This Page (optional).....▶ 3450.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES MARTIN

Mailing Address **3995 PRAIRIE DUNES DR**

City **SARASOTA** State **FL** Zip Code **34238**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JAMES H MARTIN DC PC** Occupation **DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.88189

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			25			2015			

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
JAMES MARTIN

Mailing Address **2905 FOREST HILLS TEXAS**

City **LEAGUE CITY** State **TX** Zip Code **77573**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNEMPLOYED** Occupation **UNEMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
217.05

Transaction ID : SA17A.88185

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period
182.05

C. Full Name (Last, First, Middle Initial)
JAMES MARTIN

Mailing Address **2905 FOREST HILLS TEXAS**

City **LEAGUE CITY** State **TX** Zip Code **77573**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNEMPLOYED** Occupation **UNEMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
227.05

Transaction ID : SA17A.88186

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period
10.00

Subtotal Of Receipts This Page (optional).....▶ **242.05**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JO MARTIN

Mailing Address P.O.BOX 560

City	State	Zip Code
MILFORD	IA	51351

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 ▼
 _____ 2700.00

Transaction ID : SA17A.88203

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

_____	2700.00
-------	---------

B. Full Name (Last, First, Middle Initial)
MR. KONRAD M MARTIN

Mailing Address 10 CHARLES VIEW LANE

City	State	Zip Code
MEDWAY	MA	02053

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.88244

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Amount of Each Receipt this Period

_____	500.00
-------	--------

C. Full Name (Last, First, Middle Initial)
PETER MARTIN

Mailing Address 30 CARMAN AV

City	State	Zip Code
EAST ROCKAWAY	NY	11518

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
QUEENS DISTRICT ATTORNE	POLICE LIEUTENANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 201.03

Transaction ID : SA17A.88292

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	5

Amount of Each Receipt this Period

_____	88.56
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Subtotal Of Receipts This Page (optional).....▶ **3288.56**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. ROBERT S MARTIN

Mailing Address 242 5TH ST S

City State Zip Code
NAPLES FL 34102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAKER HILL INDUSTRY PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.88340

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
RYAN MARTIN

Mailing Address 123 SKYVIEW LANE

City State Zip Code
LITITZ PA 17543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M & R AUTO CENTER OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.88350

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DEBBIE MARUSH

Mailing Address 1570 BAY BLVD

City State Zip Code
ATLANTIC BEACH NY 11509

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 : SA17A.88652

Date of Receipt
M M / D D / Y Y Y Y
07 / 19 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 900.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
EDWIN MARZEC

Mailing Address 2136 BEECH KNOLL RD.

City State Zip Code
LOS ANGELES CA 90046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EDWIN K. MARZEC - A LAW CORPORATION ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.88683

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ANTHONY MASCOLO

Mailing Address 20 SANTO COURT

City State Zip Code
STATEN ISLAND NY 10306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANTHONY MASCOLO, ESQ ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.88715

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANTHONY MASCOLO

Mailing Address 20 SANTO COURT

City State Zip Code
STATEN ISLAND NY 10306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANTHONY MASCOLO, ESQ ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
276.67

Transaction ID : SA17A.88716

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
26.67

Subtotal Of Receipts This Page (optional).....▶ 526.67

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAOLO MASETTI

Mailing Address **848 CARILLON CT**

City State Zip Code
CREVE COEUR MO 63141

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 ▼
225.00

Transaction ID : SA17A.88743

Date of Receipt
M M / D D / Y Y Y Y
09 / 20 / 2015

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
ROBERT MASONE

Mailing Address **1750 GRANVILLE PIKE**

City State Zip Code
LANCASTER OH 43130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPINAL TECHNOLOGY PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
278.40

Transaction ID : SA17A.88839

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Receipt this Period
142.95

C. Full Name (Last, First, Middle Initial)
STEVEN MASSARO

Mailing Address **84 WASHBURN ST**

City State Zip Code
LAKE GROVE NY 11755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NATIONAL GRID UTILITY GAS TECHNICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
266.13

Transaction ID : SA17A.88858

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
166.13

Subtotal Of Receipts This Page (optional)..... **334.08**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRED MATHIAS

Mailing Address **8528 QUAIL HOLLOW RD**

City State Zip Code
INDIANAPOLIS IN 46260

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 ▼
1000.00

Transaction ID : SA17A.89070

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DEBORAH MATTHEWS

Mailing Address **P.O. BOX 26**

City State Zip Code
IDLEDALE CO 80453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MOUNT VERNON MANAGEMENT BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.89195

Date of Receipt
M M / D D / Y Y Y Y
07 11 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANTHONY AND JANE MAUCERI

Mailing Address **BOX 1700**

City State Zip Code
BOCA GRANDE FL 33921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.89313

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1500.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. FRANK E MAXWELL III

Mailing Address 136 JAMIE LN

City	State	Zip Code
DELHI	LA	71232

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.89435

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOHN O MAXWELL

Mailing Address 77 SANTA BARBARA DR

City	State	Zip Code
ALISO VIEJO	CA	92656

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DELL	VP OF PRODUCT MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.89442

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN O MAXWELL

Mailing Address 77 SANTA BARBARA DR

City	State	Zip Code
ALISO VIEJO	CA	92656

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DELL	VP OF PRODUCT MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.89443

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) KENNETH MAYER			Transaction ID : SA17A.89558		
Mailing Address 14534 CR 19			Date of Receipt		
City PLATTEVILLE			State CO	Zip Code 80651	
FEC ID number of contributing federal political committee.			C		
Name of Employer SELF EMPLOYED		Occupation FARMER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
			Amount of Each Receipt this Period		
			250.00		

B. Full Name (Last, First, Middle Initial) KENNETH MAYER			Transaction ID : SA17A.89559		
Mailing Address 14534 CR 19			Date of Receipt		
City PLATTEVILLE			State CO	Zip Code 80651	
FEC ID number of contributing federal political committee.			C		
Name of Employer SELF EMPLOYED		Occupation FARMER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
			Amount of Each Receipt this Period		
			500.00		

C. Full Name (Last, First, Middle Initial) BOBBY C. MAYES			Transaction ID : SA17A.89593		
Mailing Address 418 N INTERSTATE DRIVE			Date of Receipt		
City NORMAN			State OK	Zip Code 73072	
FEC ID number of contributing federal political committee.			C		
Name of Employer BRSI,LLC		Occupation SELF EMPLOYED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
			Amount of Each Receipt this Period		
			307.34		

Subtotal Of Receipts This Page (optional).....▶ 807.34

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL J. MAZZEO

Mailing Address 7312 14TH AVENUE

City State Zip Code
BROOKLYN NY 11228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ELM EQUITY PARTNERS LLC PRIVATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
236.27

Transaction ID : SA17A.89745

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
236.27

B. Full Name (Last, First, Middle Initial)
KERRY MCADAM

Mailing Address 1200 BEACON PARKWAY EAST
706

City State Zip Code
BIRMINGHAM AL 35209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCADAM PROPERTIES LLC COMMERCIAL REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.08

Transaction ID : SA17A.89789

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
57.25

C. Full Name (Last, First, Middle Initial)
GREG MCAFEE

Mailing Address 3344 SUNSET PASS

City State Zip Code
BELLROOK OH 45305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCAFEE HVAC ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.89799

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 793.52

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 424 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HERMAN MCBRIDE

Mailing Address **14600 ST. RT. 65 PO BOX 491**

City JACKSON CENTER	State OH	Zip Code 45334
-------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C _____

Name of Employer RISING SUN EXPRESS	Occupation OWNER
---	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **1000.00**

Transaction ID : SA17A.89892

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period
 _____ **1000.00**

B. Full Name (Last, First, Middle Initial)
WILLIAM MCCALL

Mailing Address **320 N CEDAR BLUFF RD STE 102**

City KNOXVILLE	State TN	Zip Code 37923
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C _____

Name of Employer HERITAGE ADVISORY GRIUP	Occupation FINANCIAL CONSULTANT
--	---

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **250.00**

Transaction ID : SA17A.89995

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period
 _____ **250.00**

C. Full Name (Last, First, Middle Initial)
CARMELL MCCANDLESS

Mailing Address **336 GOLDEN PICK DRIVE**

City DAYTON	State NV	Zip Code 89403
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C _____

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **425.00**

Transaction ID : SA17A.90005

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Amount of Each Receipt this Period
 _____ **425.00**

Subtotal Of Receipts This Page (optional).....

_____ **1675.00**

Total This Period (last page this line number only).....

SCHEDULE A-P
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 425 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CARPELL MCCANDLESS			Transaction ID : SA17A.90006
Mailing Address 336 GOLDEN PICK DRIVE			Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2015
City DAYTON	State NV	Zip Code 89403	Amount of Each Receipt this Period <input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="525.00"/>	
B. Full Name (Last, First, Middle Initial) CARPELL MCCANDLESS			
Mailing Address 336 GOLDEN PICK DRIVE			Transaction ID : SA17A.90007
Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2015			
City DAYTON	State NV	Zip Code 89403	Amount of Each Receipt this Period <input type="text" value="205.00"/>
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="730.00"/>	
C. Full Name (Last, First, Middle Initial) CARPELL MCCANDLESS			
Mailing Address 336 GOLDEN PICK DRIVE			Transaction ID : SA17A.90008
Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2015			
City DAYTON	State NV	Zip Code 89403	Amount of Each Receipt this Period <input type="text" value="370.00"/>
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1100.00"/>	
Subtotal Of Receipts This Page (optional).....			
Total This Period (last page this line number only).....			<input type="text" value=""/>

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES MCCARROLL

Mailing Address 599 LEXINGTON AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REED SMITH LLP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.90050

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
260.55

B. Full Name (Last, First, Middle Initial)
GEORGE MCCARTHY

Mailing Address 425 AHWAHNEE ROAD

City State Zip Code
LAKE FOREST IL 60045

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 : SA17A.90086

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WERNER MC CHRISTY

Mailing Address P. O. BOX 952

City State Zip Code
BRAWLEY CA 92227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEORGE MITCHELL BUILDERS INC. CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.89770

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 760.55

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) WILLIAM MCCLELLAN		Transaction ID : SA17A.90216	
Mailing Address 4325 BRETTWOOD LANE		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2015	
City MORGANTOWN	State WV	Zip Code 26508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SELF EMPLOYED	Occupation PLASTIC SURGEON		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) WILLIAM MCCLELLAN		Transaction ID : SA17A.90217	
Mailing Address 4325 BRETTWOOD LANE		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2015	
City MORGANTOWN	State WV	Zip Code 26508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.52	
Name of Employer SELF EMPLOYED	Occupation PLASTIC SURGEON		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 282.52		

C. Full Name (Last, First, Middle Initial) CINDY MCCOMBS		Transaction ID : SA17A.90331	
Mailing Address 1188 CENTER POINT DR		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015	
City HENDERSON	State NV	Zip Code 89074	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 511.05	
Name of Employer REALM OF DESIGN	Occupation MANUFACTURER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 511.05		

Subtotal Of Receipts This Page (optional).....▶ 793.57

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT MCCOOL

Mailing Address 5685 HEARTHSTONE TRAIL

City	State	Zip Code
NEW MARKET	MD	21774

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BOLD CONCEPTS.COM	VP OPERATIONS CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.90368

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ROBERT MCCOOL

Mailing Address 5685 HEARTHSTONE TRAIL

City	State	Zip Code
NEW MARKET	MD	21774

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BOLD CONCEPTS.COM	VP OPERATIONS CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.90369

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			14			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GEORGIA MCCOY

Mailing Address 247 W. FREEMASON ST.

City	State	Zip Code
NORFOLK	VA	23510

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.90461

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID MCELWEE

Mailing Address **59 MORDANSVILLE ROAD**

City **BLOOMSBURG** State **PA** Zip Code **17815**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
204.09

Transaction ID : SA17A.91018

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
204.09

B. Full Name (Last, First, Middle Initial)
DELORA MCENANEY

Mailing Address **2133 LOU ELLEN LN**

City **HOUSTON** State **TX** Zip Code **77018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DEMAC CONCRETE** Occupation **VP**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.91027

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
AVERY MCENERY

Mailing Address **185 PLYMOUTH ST
APT 3N**

City **BROOKLYN** State **NY** Zip Code **11201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEQUIN LLC** Occupation **SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.91029

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
209.69

Subtotal Of Receipts This Page (optional)..... **663.78**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT MCFARLAND

Mailing Address 7022 DAHLBERG RD

City	State	Zip Code
FERNDALE	WA	98248

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	DESIGN ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.91082

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY MCGILVRAY

Mailing Address 294 HARVARD RD

City	State	Zip Code
BOLTON	MA	01740

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.91252

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. STEVEN F MCGRATH

Mailing Address PO BOX 1816

City	State	Zip Code
DUXBURY	MA	02331

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.91421

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES F MCGUIGAN

Mailing Address 19900 BEACH RD. APT. 501

City	State	Zip Code
JUPITER	FL	33469

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SUPERIOR ACOUSTICS, INC.	GENERAL EMPLOYEE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.91452

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	25	/	2015

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
BRIAN MCGUIRE

Mailing Address 2300 BARRINGTON ROAD
#400

City	State	Zip Code
HOFFMAN ESTATES	IL	60169

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
KEYSTONE CORPORATION	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.91466

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	10	/	2015

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
MARGARET MCINNIS

Mailing Address 4 GOODWIN ROAD

City	State	Zip Code
BEVERLY	MA	01915

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BENEVENTO ASPHALT CORP.	OFFICE MGR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 270.25

Transaction ID : SA17A.91554

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	12	/	2015

Amount of Each Receipt this Period
 _____ 270.25

Subtotal Of Receipts This Page (optional).....▶ _____ 1520.25

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM MCKAHAN

Mailing Address **7829 PRAIRIE FIRE COURT**

City State Zip Code
WESTERVILLE OH 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
E LIFE BROKERAGE, LLC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.91610

Date of Receipt
M M / D D / Y Y Y Y
08 12 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES V MCKAY JR

Mailing Address **5 EASTHAM RD**

City State Zip Code
NEWTON MA 02459

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.91620

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOSEPH L MCKAY

Mailing Address **3535 INLAND EMPIRE BLVD**

City State Zip Code
ONTARIO CA 91764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JM REALTY GROUP OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.91631

Date of Receipt
M M / D D / Y Y Y Y
09 17 2015

Amount of Each Receipt this Period
260.55

Subtotal Of Receipts This Page (optional).....▶ **1510.55**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) THOMAS MCKAY Mailing Address 11339 TAYLOR DRAPER LANE City AUSTIN State TX Zip Code 78720 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation TOM'S WAY INC MACHINIST Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="350.00"/>		Transaction ID : SA17A.91646 Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2015 Amount of Each Receipt this Period <input type="text" value="100.00"/>
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B. Full Name (Last, First, Middle Initial) THOMAS MCKAY Mailing Address 11339 TAYLOR DRAPER LANE City AUSTIN State TX Zip Code 78720 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation TOM'S WAY INC MACHINIST Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="601.15"/>		Transaction ID : SA17A.91647 Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2015 Amount of Each Receipt this Period <input type="text" value="251.15"/>
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C. Full Name (Last, First, Middle Initial) THOMAS MCKAY Mailing Address 11339 TAYLOR DRAPER LANE City AUSTIN State TX Zip Code 78720 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation TOM'S WAY INC MACHINIST Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="637.82"/>		Transaction ID : SA17A.91648 Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2015 Amount of Each Receipt this Period <input type="text" value="36.67"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GARY MCKEE

Mailing Address 934 GREY VILLAGE CIRCLE

City State Zip Code
MARIETTA GA 30068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED FINANCIER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.91669

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SHAFFORD MCKINNEY

Mailing Address 5495 BELT LINE ROAD
SUITE 120

City State Zip Code
DALLAS TX 75254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MUSTANG CONTRACTING SERVICES OF DALLAS OWNER/GM

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
231.85

Transaction ID : SA17A.91853

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
231.85

C. Full Name (Last, First, Middle Initial)
JANIS MCLAREN

Mailing Address 8907 CABALLERO DR.

City State Zip Code
ALTA LOMA CA 91737

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE APPRAISER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.91921

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 731.85

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JIM MCLEAN

Mailing Address 4400 NW 87TH AVE

City State Zip Code
MIAMI FL 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED GOLF SCHOOL OWNET

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.91983

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
JOHN MCMAHAN

Mailing Address 1980 POST OAK BLVD
1101

City State Zip Code
HOUSTON TX 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIGMAN MARINE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.92086

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
MIKE MCMANUS

Mailing Address 3520 LAMONTVILLE RD.

City State Zip Code
DECATUR TN 37322

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SAWMILLER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.92161

Date of Receipt

/ /

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONLIE MCMULLIN

Mailing Address 202 S 1ST

City State Zip Code
COPPERAS COVE TX 76522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.92230

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL MCNERNEY

Mailing Address 570 W 5TH STREET

City State Zip Code
SAN PEDRO CA 90731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCNERNEY'S, INC FUNERAL SERVICE PROVIDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17A.92385

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
BETTY H MCRAE

Mailing Address 8101 NORTH 47TH STREET

City State Zip Code
PARADISE VALLEY AZ 85253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRENDS MAGAZINE EDITOR IN CHIEF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.92486

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 550.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DARRIN MEADE		Transaction ID : SA17A.92562	
Mailing Address 303 EQUINOX LANE APT#303		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2015	
City LOUISVILLE	State KY	Zip Code 40243	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 238.51	
Name of Employer SELF	Occupation INVESTOR	Election Cycle-to-Date 238.51	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) JANINE MEDINA		Transaction ID : SA17A.92685	
Mailing Address 1 RIVIERA ROAD		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015	
City HUDSON	State NH	Zip Code 03051	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 57.10	
Name of Employer LEGAL	Occupation SECRETARY	Election Cycle-to-Date 205.50	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) NANCY MEEKIN		Transaction ID : SA17A.92754	
Mailing Address 663 EAST ROCKS DRIVE		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015	
City SANIBEL	State FL	Zip Code 33957	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation NONE	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ 545.61

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CINDY MEEKS

Mailing Address **80DEWAR STREET**

City State Zip Code
FUQUAY-VARINA NC 27526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED BOOKKEEPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.42

Transaction ID : SA17A.92761

Date of Receipt
M M / D D / Y Y Y Y
09 04 2015

Amount of Each Receipt this Period
335.58

B. Full Name (Last, First, Middle Initial)
DONALD MELTON

Mailing Address **12529 CYPRESS AVE**

City State Zip Code
CHINO CA 91710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF APPRAISER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.93009

Date of Receipt
M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RONNIE MERCER

Mailing Address **7902 S. GARNETT ROAD**

City State Zip Code
BROKEN ARROW OK 74012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAREHOUSE MARKET SR VICE PRES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.93236

Date of Receipt
M M / D D / Y Y Y Y
08 15 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **835.58**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RONNIE MERCER		Transaction ID : SA17A.93237	
Mailing Address 7902 S. GARNETT ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2015	
City BROKEN ARROW	State OK	Zip Code 74012	Amount of Each Receipt this Period _____ 130.37 _____
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ _____ 380.37 _____	
Name of Employer WAREHOUSE MARKET	Occupation SR VICE PRES		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) STEVE MERCZYNSKI		Transaction ID : SA17A.93285	
Mailing Address 15 CHARLES STREET APR 6B		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2015	
City NEW YORK	State NY	Zip Code 10014	Amount of Each Receipt this Period _____ 206.01 _____
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ _____ 206.01 _____	
Name of Employer UNEMPLOYED	Occupation UNEMPLOYED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) DAVID MERRIFIELD		Transaction ID : SA17A.93357	
Mailing Address 675 BRETHERN CHURCH ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2015	
City JONESBOROUGH	State TN	Zip Code 37659	Amount of Each Receipt this Period _____ 250.00 _____
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ _____ 250.00 _____	
Name of Employer THE LIGHTHOUSE COUNSELING SERVICES, PL	Occupation PHYSICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ **586.38**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
G. E. MERRILL

Mailing Address 110 CARROLL ST

City State Zip Code
SHREVEPORT LA 71105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED GEOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.93370

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SHELLY METJE

Mailing Address 20466 S MAY RD

City State Zip Code
OREGON CITY OR 97045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J D FULWILER & CO SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.93570

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PAUL MEYERS

Mailing Address 23111 FM 1462

City State Zip Code
DAMON TX 77430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.93740

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KRISH MICHAELS

Mailing Address 7301 BURNET RD SUITE 102

City	State	Zip Code
AUSTIN	TX	78757

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RECORDERS.COM	FOUNDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.93815

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BARBARA MIEHLS

Mailing Address 179 VIA LOS MIRADORES

City	State	Zip Code
REDONDO BEACH	CA	90277

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.93976

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
THOMAS MIGUEL

Mailing Address 10835 ROSEWOOD DR

City	State	Zip Code
HAGERSTOWN	MD	21740

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.94022

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES MIHOS

Mailing Address **29 HARLOW STREET**

City State Zip Code
NORTH EASTON MA 02356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OLDE NORTHEAST REALTY LP REAL ESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.94041

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DEAN MILLER

Mailing Address **PO BOX 2246**

City State Zip Code
BRIGHTON MI 48116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FORMING TECHNOLOGIES OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.94355

Date of Receipt
M M / D D / Y Y Y Y
08 19 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
DIANA MILLER

Mailing Address **1762 COVE CT**

City State Zip Code
LONGMONT CO 80503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
424.94

Transaction ID : SA17A.94364

Date of Receipt
M M / D D / Y Y Y Y
09 14 2015

Amount of Each Receipt this Period
424.94

Subtotal Of Receipts This Page (optional)..... **935.49**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFFREY R. MILLER

Mailing Address P.O. BOX 3061

City	State	Zip Code
COSTA MEASA	CA	92628

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
GELSON'S SUPERMARKET	PORTER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.94481

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOYCE MILLER

Mailing Address 277 HILLCREST ROAD

City	State	Zip Code
CAMP HILL	PA	17011

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.94522

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
LAKIN MILLER

Mailing Address 112 PLANTATION POINT

City	State	Zip Code
NATCHITOCHEs	LA	71457

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MPG PIPELINE CONTRACTORS LLC	WELDER HELPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.94563

Date of Receipt

M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHAWN MILLER

Mailing Address 1204 CLAIREMONT LANE

City State Zip Code
BURLESON TX 76028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PATRIOT ASSETS REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.94735

Date of Receipt
M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RONALD MILLIKEN

Mailing Address 8318 CROSS COUNTRY DR

City State Zip Code
HUMBLE TX 77346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAYER ELECTRIC PROJ ENG -ELECTRICAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.94855

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARK MILLINER

Mailing Address 9920 FAIRLAND ST

City State Zip Code
FORT WORTH TX 76116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEALMARK INC CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.94864

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MARK MILLINER		Transaction ID : SA17A.94865	
Mailing Address 9920 FAIRLAND ST		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2015	
City FORT WORTH	State TX	Zip Code 76116	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.42	
Name of Employer SEALMARK INC	Occupation CONSTRUCTION		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 322.42	

B. Full Name (Last, First, Middle Initial) SUSAN MILLS		Transaction ID : SA17A.94946	
Mailing Address 5227 HALFWAY ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
City ELBRIDGE	State NY	Zip Code 13060	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 441.12	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 441.12	

C. Full Name (Last, First, Middle Initial) DIANA MILLWOOD		Transaction ID : SA17A.94966	
Mailing Address P. O. BOX 459		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015	
City JASPER	State GA	Zip Code 30143	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BANKING	Occupation EXECUTIVE BANKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Subtotal Of Receipts This Page (optional).....▶ **1013.54**

Total This Period (last page this line number only).....▶

**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="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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MIKE MILROY

Mailing Address 4500 W. CARRIAGE LANE

City State Zip Code
PRESCOTT AZ 86305

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.94995

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
SANDRA MIMS

Mailing Address 34 WATERWAY ISLAND DRIVE

City State Zip Code
ISLE OF PALMS SC 29451-2728

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.95032

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="266.17"/>

C. Full Name (Last, First, Middle Initial)
ALAN MINATO

Mailing Address 1107 FAIR OAKS AVE
507

City State Zip Code
SOUTH PASADENA CA 91030

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NATURAL NINE, INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.95040

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALAN MINATO

Mailing Address 1107 FAIR OAKS AVE
507

City State Zip Code
SOUTH PASADENA CA 91030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NATURAL NINE, INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
537.20

Transaction ID : SA17A.95041

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period
37.20

B. Full Name (Last, First, Middle Initial)
MR. PAUL J MINIHAINE

Mailing Address 181 LAKE ST

City State Zip Code
BRIGHTON MA 02135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSPORT FACILITIES MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.95085

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
SAMUEL MIREJOVSKY

Mailing Address 204 TALL OAK

City State Zip Code
IRVINE CA 92603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BERGENER MIREJOVSKY ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.95214

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 3037.20

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN MITCHELL

Mailing Address 1108 OLD OCEAN BLVD

City RYE State NH Zip Code 03870

FEC ID number of contributing federal political committee. **C**

Name of Employer SPECTRO SCIENTIFIC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.95315

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 03 / 2015

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
JIMMIE MITCHELL

Mailing Address 13976 IH 10 W

City ORANGE State TX Zip Code 77632

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation CONSTRUCTION MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.95365

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 03 / 2015

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
TIM MITCHELL

Mailing Address PO BOX 101020

City CAPE CORAL State FL Zip Code 33910

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.95439

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2015

Amount of Each Receipt this Period
 250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) STEVE MITLYNG Mailing Address 13045 1ST STREET WEST City WATSON State MN Zip Code 56295 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer STEVE MITLYNG Occupation SELF EMPLOYED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		Transaction ID : SA17A.95453 Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
--	--	--

B. Full Name (Last, First, Middle Initial) STEVE MITLYNG Mailing Address 13045 1ST STREET WEST City WATSON State MN Zip Code 56295 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer STEVE MITLYNG Occupation SELF EMPLOYED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="363.21"/>		Transaction ID : SA17A.95454 Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2015 Amount of Each Receipt this Period <input type="text" value="113.21"/>
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C. Full Name (Last, First, Middle Initial) STEVE MITLYNG Mailing Address 13045 1ST STREET WEST City WATSON State MN Zip Code 56295 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer STEVE MITLYNG Occupation SELF EMPLOYED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="399.88"/>		Transaction ID : SA17A.95455 Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2015 Amount of Each Receipt this Period <input type="text" value="36.67"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MS. CAROL MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

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 ▼
5400.00

Transaction ID : SA17A.95497

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period
5400.00

B. Full Name (Last, First, Middle Initial)
MS. CAROL MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

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 ▼
2700.00

Transaction ID : SA17A.95498

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

REDESIGNATE TO GENERAL

Amount of Each Receipt this Period
-2700.00

C. Full Name (Last, First, Middle Initial)
MS. CAROL MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

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 ▼
5400.00

Transaction ID : SA17A.95499

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

REDESIGNATED FROM PRIMARY

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5400.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. LARRY A MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.D.C HOLDINGS INVESTMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.95501

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period
5400.00

B. Full Name (Last, First, Middle Initial)
MR. LARRY A MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.D.C HOLDINGS INVESTMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.95502

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

REDESIGNATE TO GENERAL

Amount of Each Receipt this Period
-2700.00

C. Full Name (Last, First, Middle Initial)
MR. LARRY A MIZEL

Mailing Address 4350 S MONACO ST

City State Zip Code
DENVER CO 80237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.D.C HOLDINGS INVESTMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.95503

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

REDESIGNATED FROM PRIMARY

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5400.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BILL MIZENER

Mailing Address 7226 S GARY PL.

City State Zip Code
TULSA OK 74136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CBRE COMMERCIAL REAL ESTATE SALESMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.95509

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES MODISSETT

Mailing Address 103 BAYOU LAFOURCHE DRIVE

City State Zip Code
THIBODAUX LA 70301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KIDNEY CENTER OF SOUTH LOUISIANA PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.95585

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LARRY MOFFITT

Mailing Address 316 CALIFORNIA AVENUE
122

City State Zip Code
RENO NV 89509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.95638

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RON MOHR

Mailing Address **1563 JEFFERSON AVE**

City **REDWOOD CITY** State **CA** Zip Code **94064**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.95691

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JERRY MOISON

Mailing Address **737 BRENTWOOD PLACE**

City **LOS ALTOS** State **CA** Zip Code **94024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **COMMERCIAL REAL ESTASTE INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.95711

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SAMANTHA MONDAY

Mailing Address **22 CHRISTOL STREET**

City **METUCHEN** State **NJ** Zip Code **08840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GARDENIAS FLORAL** Occupation **FLORIST/ ENTREPRENEUR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.95869

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **600.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SAMANTHA MONDAY

Mailing Address **22 CHRISTOL STREET**

City State Zip Code
METUCHEN NJ 08840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GARDENIAS FLORAL FLORIST/ ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
276.78

Transaction ID : SA17A.95870

Date of Receipt
M M / D D / Y Y Y Y
08 15 2015

Amount of Each Receipt this Period
26.78

B. Full Name (Last, First, Middle Initial)
WILLIAM MONROE

Mailing Address **14229 JOHN CLARK RD**

City State Zip Code
GULFPORT MS 39503

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 ▼
346.26

Transaction ID : SA17A.95947

Date of Receipt
M M / D D / Y Y Y Y
09 15 2015

Amount of Each Receipt this Period
196.26

C. Full Name (Last, First, Middle Initial)
RITA MONTESI

Mailing Address **8857 FAIRWAY GARDENS DRIVE**

City State Zip Code
CORDOVA TN 38016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERIOR INDUSTRIAL SUPPLY BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.96022

Date of Receipt
M M / D D / Y Y Y Y
08 06 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **723.04**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RAYMOND MOORE

Mailing Address **1208 CANTER ROAD**

City **ESCONDIDO** State **CA** Zip Code **92027**

FEC ID number of contributing federal political committee.

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.96417

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
TOMMY MOORE

Mailing Address **1423CLAIBORNE LANE**

City **ALEDO** State **TX** Zip Code **76087**

FEC ID number of contributing federal political committee.

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.96476

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
LEE MOOSCHEKIAN

Mailing Address **205 6TH ST.**

City **HUNTINGTON BEACH** State **CA** Zip Code **92648**

FEC ID number of contributing federal political committee.

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.96526

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	1	5

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD MORAN

Mailing Address 618 PARKVIEW DR

City State Zip Code
STEAMBOAT SPRINGS CO 80487

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 ▼
223.84

Transaction ID : SA17A.96598

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
123.84

B. Full Name (Last, First, Middle Initial)
RICHARD MORAN

Mailing Address 618 PARKVIEW DR

City State Zip Code
STEAMBOAT SPRINGS CO 80487

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 ▼
323.84

Transaction ID : SA17A.96599

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address 849 BOSTON POST ROAD

City State Zip Code
MARLBOROUGH MA 01752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TJX INFRASTRUCTURE ENGINEER III

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.96633

Date of Receipt
M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 473.84

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City	State	Zip Code
MARLBOROUGH	MA	01752

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TJX	INFRASTRUCTURE ENGINEER III

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Transaction ID : SA17A.96634

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	1	5

Amount of Each Receipt this Period

150.00

B. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City	State	Zip Code
MARLBOROUGH	MA	01752

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TJX	INFRASTRUCTURE ENGINEER III

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Transaction ID : SA17A.96635

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	5

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City	State	Zip Code
MARLBOROUGH	MA	01752

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TJX	INFRASTRUCTURE ENGINEER III

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Transaction ID : SA17A.96636

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	7	/	2	0	1	5

Amount of Each Receipt this Period

200.00

Subtotal Of Receipts This Page (optional).....▶ 550.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City **MARLBOROUGH** State **MA** Zip Code **01752**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TJX** Occupation **INFRASTRUCTURE ENGINEER III**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Transaction ID : SA17A.96637

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City **MARLBOROUGH** State **MA** Zip Code **01752**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TJX** Occupation **INFRASTRUCTURE ENGINEER III**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Transaction ID : SA17A.96638

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2015			

Amount of Each Receipt this Period

150.00

C. Full Name (Last, First, Middle Initial)
MICHAEL MORE

Mailing Address **849 BOSTON POST ROAD**

City **MARLBOROUGH** State **MA** Zip Code **01752**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TJX** Occupation **INFRASTRUCTURE ENGINEER III**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1550.00

Transaction ID : SA17A.96639

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

Amount of Each Receipt this Period

150.00

Subtotal Of Receipts This Page (optional)..... **400.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) GAIL MOREHEAD		Transaction ID : SA17A.96650	
Mailing Address PO BOX 82 59 MAINSTREET		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2015	
City AUSTIN	State NV	Zip Code 89310	Amount of Each Receipt this Period _____ 158.83
FEC ID number of contributing federal political committee. C		Name of Employer INTERNATIONAL CAFE	
Occupation OWNER		Election Cycle-to-Date _____ 261.75	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) ELAINE MOREIRA		Transaction ID : SA17A.96662	
Mailing Address 2807 HILLVIEW CT		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2015	
City FAIRFIELD	State CA	Zip Code 94534	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C		Name of Employer LE COMMODITIES, LLC	
Occupation PRINCIPAL		Election Cycle-to-Date _____ 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) JAMES MORELAND		Transaction ID : SA17A.96669	
Mailing Address 317 NORTH MADISON AVE		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2015	
City MONROVIA	State CA	Zip Code 91016	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED	
Occupation RETIRED		Election Cycle-to-Date _____ 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ _____ **658.83**

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DENNIS MORGAN

Mailing Address P.O. BOX 152

City State Zip Code
BAIROIL WY 82322

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 : SA17A.96762

Date of Receipt

M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
DENNIS MORGAN

Mailing Address P.O. BOX 152

City State Zip Code
BAIROIL WY 82322

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 ▼
500.00

Transaction ID : SA17A.96763

Date of Receipt

M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
DENNIS MORGAN

Mailing Address P.O. BOX 152

City State Zip Code
BAIROIL WY 82322

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 ▼
525.00

Transaction ID : SA17A.96764

Date of Receipt

M M / D D / Y Y Y Y
08 10 2015

Amount of Each Receipt this Period

25.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ARMEN MORIAN

Mailing Address **269 WEST 72ND STREET
#11A**

City **NEW YORK** State **NY** Zip Code **10023**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STATE OF NEW YORK, OFFICE OF THE ATTORNEY GENERAL** Occupation **LAWYER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.96891

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ALLEN MORNINGSTAR

Mailing Address **4283 W BLUE MIST CT**

City **FAYETTEVILLE** State **AR** Zip Code **72704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.96973

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BILL MORRIS

Mailing Address **7168 GRAHAM ROAD
SUITE 175**

City **INDIANAPOLIS** State **IN** Zip Code **46250**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MILESTONE MORTGAGE** Occupation **CFO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
229.54

Transaction ID : SA17A.97036

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
229.54

Subtotal Of Receipts This Page (optional)..... **979.54**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DR . OLIVIA MORRIS

Mailing Address 2160 FRY BLVD,STEC5,507

City State Zip Code
SIERRA VISTA AZ 85635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BONE JOINT CENTER SOUTHERN NEW MEX ORTHOPEDIC SURGEON SPORTS MED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.97061

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEAN MORRIS

Mailing Address 1225 MARKLEY DRIVE

City State Zip Code
LARGO FL 33770

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 ▼
207.54

Transaction ID : SA17A.97087

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period
57.10

C. Full Name (Last, First, Middle Initial)
JEAN MORRIS

Mailing Address 1225 MARKLEY DRIVE

City State Zip Code
LARGO FL 33770

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 ▼
376.37

Transaction ID : SA17A.97088

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
168.83

Subtotal Of Receipts This Page (optional).....▶ 725.93

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MALCOLM MORRIS

Mailing Address **P O BOX 1311**

City	State	Zip Code
LEESVILLE	LA	71496-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MORRIS INSURANCE AGENCY, INC.	INSURANCE & REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.38

Transaction ID : SA17A.97125

Date of Receipt
MM / DD / YYYY
08 / 22 / 2015

Amount of Each Receipt this Period
260.38

B. Full Name (Last, First, Middle Initial)
MICHAEL MORRISON

Mailing Address **P.O. BOX 631**

City	State	Zip Code
ATHENS	TX	75751

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
COLE AIR CONDITIONING	ENGINEER/SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.97232

Date of Receipt
MM / DD / YYYY
08 / 10 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHRIS MORSE

Mailing Address **415 PENN RD**

City	State	Zip Code
WYNNEWOOD	PA	19096

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WILLIAM BLAIR	INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.97319

Date of Receipt
MM / DD / YYYY
09 / 15 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **1010.38**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JEFFORY MORSHEAD Mailing Address 336 BON AIR CENTER 422 City GREENBRAE State CA Zip Code 94904 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="500.00"/>		Transaction ID : SA17A.97346 Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2015 Amount of Each Receipt this Period <input type="text" value="500.00"/>
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B. Full Name (Last, First, Middle Initial) SUSIE MOSS Mailing Address P.O. BOX 3383 City TEXARKANA State TX Zip Code 75504 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		Transaction ID : SA17A.97560 Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
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C. Full Name (Last, First, Middle Initial) THOMAS MOSSER Mailing Address 1843 MCCAMMON ROAD City KNOXVILLE State TN Zip Code 37920 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer AMBER GROUP Occupation PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>		Transaction ID : SA17A.97584 Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2015 Amount of Each Receipt this Period <input type="text" value="1000.00"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ELYCE MOUSKONDIS			Transaction ID : SA17A.97666		
Mailing Address 841 N JUNIPERPOINT DRIVE			Date of Receipt MM / DD / YYYY 07 / 20 / 2015		
City SALT LAKE CITY	State UT	Zip Code 84103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00		
Name of Employer RETIRED	Occupation RETIRED		Amount of Each Receipt this Period 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

B. Full Name (Last, First, Middle Initial) ELYCE MOUSKONDIS			Transaction ID : SA17A.97667		
Mailing Address 841 N JUNIPERPOINT DRIVE			Date of Receipt MM / DD / YYYY 08 / 01 / 2015		
City SALT LAKE CITY	State UT	Zip Code 84103	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00		
Name of Employer RETIRED	Occupation RETIRED		Amount of Each Receipt this Period 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00			

C. Full Name (Last, First, Middle Initial) TOM MOUZES			Transaction ID : SA17A.97676		
Mailing Address 12530 PLUM LANE			Date of Receipt MM / DD / YYYY 08 / 22 / 2015		
City WILTON	State CA	Zip Code 95693	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00		
Name of Employer BOUTIN JONES	Occupation ATTORNEY		Amount of Each Receipt this Period 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

Subtotal Of Receipts This Page (optional).....▶ **1750.00**

Total This Period (last page this line number only).....▶

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TOM MOUZES

Mailing Address 12530 PLUM LANE

City	State	Zip Code
WILTON	CA	95693

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BOUTIN JONES	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.97677

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

<input type="text" value="227.34"/>

B. Full Name (Last, First, Middle Initial)
TOM MOUZES

Mailing Address 12530 PLUM LANE

City	State	Zip Code
WILTON	CA	95693

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BOUTIN JONES	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.97678

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

<input type="text" value="155.90"/>

C. Full Name (Last, First, Middle Initial)
MARIJANA MOVER

Mailing Address 1809 COBBLEFIELD CT

City	State	Zip Code
CHAMPAIGN	IL	61822

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.97682

Date of Receipt

M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JASON MOWERY

Mailing Address **5600 KENTSHIRE DRIVE**
7

City **KETTERING** State **OH** Zip Code **45440**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MOWERY CONSTRUCTION, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.97686

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RYAN MOXLEY

Mailing Address **1412 E CORAL COVE DR**

City **GILBERT** State **AZ** Zip Code **85234**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REAL ESTATE AND MEDICAL CLINIC** Occupation **SALES AND HEALTH CARE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.97705

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
TERENCE MRUK

Mailing Address **3719 N. SAINT LOUIS AVE**
1

City **CHICAGO** State **IL** Zip Code **60618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SUPERIOR SUPER AUTO WASH, INC** Occupation **BUSINESS OWNER AND OPERATOR- CAR WASH**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.97766

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TERENCE MRUK

Mailing Address 3719 N. SAINT LOUIS AVE
1

City State Zip Code
CHICAGO IL 60618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERIOR SUPER AUTO WASH, INC BUSINESS OWNER AND OPERATOR- CAR V

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.97767

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
TERENCE MRUK

Mailing Address 3719 N. SAINT LOUIS AVE
1

City State Zip Code
CHICAGO IL 60618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUPERIOR SUPER AUTO WASH, INC BUSINESS OWNER AND OPERATOR- CAR WASH

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17A.97768

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT MUELLER

Mailing Address 1910 W 16TH STREET

City State Zip Code
LONG BEACH CA 90813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CUNICO PURCHASING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.97856

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period
260.55

Subtotal Of Receipts This Page (optional).....▶ 760.55

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANJAN MUHURY

Mailing Address 12307 CREEKWOOD AVE

City State Zip Code
CERRITOS CA 90703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED HEARING AID SPECIALIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.97888

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ALICIA MULLEN

Mailing Address P O BOX 212967

City State Zip Code
ROYAL PALM BEACH FL 33421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SERVICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
229.18

Transaction ID : SA17A.97961

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

129.18

C. Full Name (Last, First, Middle Initial)
ALICIA MULLEN

Mailing Address P O BOX 212967

City State Zip Code
ROYAL PALM BEACH FL 33421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SERVICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
479.18

Transaction ID : SA17A.97962

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 629.18

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALICIA MULLEN

Mailing Address P O BOX 212967

City State Zip Code
ROYAL PALM BEACH FL 33421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED SERVICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
507.92

Transaction ID : SA17A.97963

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period
28.74

B. Full Name (Last, First, Middle Initial)
SUSAN MULLEN

Mailing Address 401 EAST 86 ST
APT 16A

City State Zip Code
NEW YORK NY 10028

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 : SA17A.97993

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SUSAN MULLEN

Mailing Address 401 EAST 86 ST
APT 16A

City State Zip Code
NEW YORK NY 10028

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 ▼
325.89

Transaction ID : SA17A.97994

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
75.89

Subtotal Of Receipts This Page (optional).....▶ 354.63

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SUSAN MULLEN

Mailing Address 401 EAST 86 ST
APT 16A

City State Zip Code
NEW YORK NY 10028

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 ▼
381.07

Transaction ID : SA17A.97995

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
55.18

B. Full Name (Last, First, Middle Initial)
SUSAN MULLEN

Mailing Address 401 EAST 86 ST
APT 16A

City State Zip Code
NEW YORK NY 10028

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 ▼
881.07

Transaction ID : SA17A.97996

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LAURA MUNCEY

Mailing Address 4804 COMANCHE CREEK DR.

City State Zip Code
AUSTIN TX 78735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEPT. OF INFORMATION RE TELECONNUMICATIONS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
242.95

Transaction ID : SA17A.98192

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2015

Amount of Each Receipt this Period
124.11

Subtotal Of Receipts This Page (optional).....▶ 679.29

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KIMBERLY MUNDALL

Mailing Address 2102 W BASELINE RD

City State Zip Code
PHOENIX AZ 85041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MUNDALL TRUCKING, INC. BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
206.85

Transaction ID : SA17A.98196

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			14			2015			

Amount of Each Receipt this Period

206.85

B. Full Name (Last, First, Middle Initial)
CARL MUNDAY

Mailing Address 538 BUFFLEHEAD DRIVE

City State Zip Code
JOHNS ISLAND SC 29455

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 : SA17A.98198

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
DANIEL MURPHY

Mailing Address 6739 WEST HIGHLAND DRIVE

City State Zip Code
PALOS HEIGHTS IL 60463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST TRUST PORTFOLIOS WHOLESALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.33

Transaction ID : SA17A.98377

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			23			2015			

Amount of Each Receipt this Period

210.33

Subtotal Of Receipts This Page (optional).....▶

667.18

Total This Period (last page this line number only).....▶

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN MURPHY

Mailing Address 1816 W WINDY WAY

City State Zip Code
SAINT JOHNS FL 32259

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 : SA17A.98417

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN MURPHY

Mailing Address 1 PLACITA DALINDA

City State Zip Code
SANTA FE NM 87508

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 : SA17A.98419

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN MURPHY

Mailing Address 3471 JAVA PLUM AVE

City State Zip Code
MIRAMAR FL 33025-2367

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 ▼
262.73

Transaction ID : SA17A.98420

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period
154.25

Subtotal Of Receipts This Page (optional).....▶ 654.25

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JON MURPHY

Mailing Address **4460 WEST SUNSET DUNES PLACE**

City **TUCSON** State **AZ** Zip Code **85743**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAPIDSOUND INC** Occupation **SELF EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.98422

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MARK B MURPHY

Mailing Address **4 BECKER FARM ROAD
SECOND FLOOR**

City **ROSELAND** State **NJ** Zip Code **07068**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHEAST PRIVATE CLIEN** Occupation **FINANCIAL ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
158.83

Transaction ID : SA17A.98450

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
158.83

C. Full Name (Last, First, Middle Initial)
MARK B MURPHY

Mailing Address **4 BECKER FARM ROAD
SECOND FLOOR**

City **ROSELAND** State **NJ** Zip Code **07068**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHEAST PRIVATE CLIEN** Occupation **FINANCIAL ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
302.23

Transaction ID : SA17A.98460

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
143.40

Subtotal Of Receipts This Page (optional)..... **3002.23**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK B MURPHY

Mailing Address **4 BECKER FARM ROAD
SECOND FLOOR**

City **ROSELAND** State **NJ** Zip Code **07068**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHEAST PRIVATE CLIEN** Occupation **FINANCIAL ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
476.06

Transaction ID : SA17A.98454

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
173.83

B. Full Name (Last, First, Middle Initial)
PAUL MURPHY

Mailing Address **7981 9TH AVE SOUTH**

City **ST PETERSBURG** State **FL** Zip Code **33707**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BAY PINES VA HOSPITAL** Occupation **SURGEON**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.98489

Date of Receipt
M M / D D / Y Y Y Y
07 / 04 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PAUL MURPHY

Mailing Address **7981 9TH AVE SOUTH**

City **ST PETERSBURG** State **FL** Zip Code **33707**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BAY PINES VA HOSPITAL** Occupation **SURGEON**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.98490

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **673.83**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAUL MURPHY

Mailing Address 7981 9TH AVE SOUTH

City State Zip Code
ST PETERSBURG FL 33707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAY PINES VA HOSPITAL SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17A.98491

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
PAUL MURPHY

Mailing Address 7981 9TH AVE SOUTH

City State Zip Code
ST PETERSBURG FL 33707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAY PINES VA HOSPITAL SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Transaction ID : SA17A.98492

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
JOSEPH MURRAY

Mailing Address 245-10 GRAND CENTRAL PARKWAY, LG

City State Zip Code
BELLEROSE NY 11426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.98601

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1400.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT MURRAY

Mailing Address 108 DOVER RD

City State Zip Code
WELLESLEY MA 02482

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 : SA17A.98637

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JANINE MUSICK

Mailing Address PO BOX 167

City State Zip Code
POTLATCH ID 83855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEACONESS HOSPITAL POLYSOMNOGRAPHIC TECHNOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.98

Transaction ID : SA17A.98728

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
JANINE MUSICK

Mailing Address PO BOX 167

City State Zip Code
POTLATCH ID 83855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEACONESS HOSPITAL POLYSOMNOGRAPHIC TECHNOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.98

Transaction ID : SA17A.98729

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2015

Amount of Each Receipt this Period

50.00

Subtotal Of Receipts This Page (optional).....▶ 325.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PIERO MUSSO

Mailing Address **25 REYNOLDS ROAD**

City **GLENCOVE** State **NY** Zip Code **11542**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STATEWIDE DEMOLITION CORP** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.98755

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
TINSLEY MYRICK

Mailing Address **416 CLUBHOUSE DR**

City **GULF SHORES** State **AL** Zip Code **36542**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RE/MAX OF ORANGE BEACH** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.98982

Date of Receipt

08 / 23 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
NICHOLAS NAPLES

Mailing Address **1206 ANTIGUA CIRCLE**

City **PALM SPRINGS** State **CA** Zip Code **92264**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.99248

Date of Receipt

08 / 04 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT NAYLOR

Mailing Address **PO BOX 603**

City **BEMIDJI** State **MN** Zip Code **56619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.99483

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DANIEL NEAL

Mailing Address **4420 ABBEY RD W**

City **CANFIELD** State **OH** Zip Code **44406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
252.00

Transaction ID : SA17A.99499

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
252.00

C. Full Name (Last, First, Middle Initial)
ROGER NESUDA

Mailing Address **17 ALTON LN**

City **LITTLE ROCK** State **AR** Zip Code **72211**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOLLY ROGERSZ MARINA** Occupation **MARINA OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.100031

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **752.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NICK NEUBAUER

Mailing Address 40 INDIAN HILL

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED COMMODITY TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
297.49

Transaction ID : SA17A.100071

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
NICK NEUBAUER

Mailing Address 40 INDIAN HILL

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED COMMODITY TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
354.85

Transaction ID : SA17A.100074

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
57.36

C. Full Name (Last, First, Middle Initial)
NICK NEUBAUER

Mailing Address 40 INDIAN HILL

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED COMMODITY TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
604.85

Transaction ID : SA17A.100072

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 557.36

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NICK NEUBAUER

Mailing Address 40 INDIAN HILL

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED COMMODITY TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
854.85

Transaction ID : SA17A.100075

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RON NEUENBERGER

Mailing Address 11 DARK STAR CT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RECORDS ONE, LLC PROGRAMMING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
261.03

Transaction ID : SA17A.100091

Date of Receipt
M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period
101.53

C. Full Name (Last, First, Middle Initial)
HENRY NICHOLAS

Mailing Address PO BOX 24

City State Zip Code
BONITA SPRINGS FL 34133

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 ▼
300.00

Transaction ID : SA17A.100456

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period
300.00

Subtotal Of Receipts This Page (optional).....▶ 651.53

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RYAN NICHOLS

Mailing Address **610 S LIPAN ST**

City State Zip Code
DENVER CO 80223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROWNSTEIN HYATT FARBER SCHRECK LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
329.81

Transaction ID : SA17A.100540

Date of Receipt
M M / D D / Y Y Y Y
08 11 2015

Amount of Each Receipt this Period
329.81

B. Full Name (Last, First, Middle Initial)
JERRY NICKELL

Mailing Address **1888 ROCK HILL ROAD**

City State Zip Code
AUBREY TX 76227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.100589

Date of Receipt
M M / D D / Y Y Y Y
07 17 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JERRY NICKELL

Mailing Address **1888 ROCK HILL ROAD**

City State Zip Code
AUBREY TX 76227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17A.100590

Date of Receipt
M M / D D / Y Y Y Y
08 17 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **829.81**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JERRY NICKELL

Mailing Address 1888 ROCK HILL ROAD

City	State	Zip Code
AUBREY	TX	76227

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.100591

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. LISA K NIEMAN

Mailing Address 1304 BUDDY HOLLY PL

City	State	Zip Code
CLEAR LAKE	IA	50428

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NTI	SECRETARY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.100701

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
EDWARD NOBLE

Mailing Address 2620 S. MARYLAND PKWY
#145

City	State	Zip Code
LAS VEGAS	NV	89109

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.100911

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK NOETH

Mailing Address 10588 SAINT THOMAS DRIVE

City	State	Zip Code
BOCA RATON	FL	33498

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GHC	PTA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313.61

Transaction ID : SA17A.100954

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

133.40

B. Full Name (Last, First, Middle Initial)
JOSEPH NOGA

Mailing Address 9506 HUNT CLUB LANE

City	State	Zip Code
CHATSWORTH	CA	91311

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 ▼
500.00

Transaction ID : SA17A.100971

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
SHERRY K NOLAN

Mailing Address 14820 LOCHINVAR DRIVE

City	State	Zip Code
DALLAS	TX	75254

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NOW SPECIALTIES, INC.	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.101002

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ **1633.40**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN NORDIN

Mailing Address 108 EAGLE DR

City State Zip Code
KILL DEVIL HILLS NC 27948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
399.53

Transaction ID : SA17A.101105

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2015			

Amount of Each Receipt this Period

316.68

B. Full Name (Last, First, Middle Initial)
AMY NORMAN

Mailing Address 193 DARTMORE LN

City State Zip Code
DAWSONVILLE GA 30534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HALL CO TEACHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.101142

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			15			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
STEPHEN NORMAN

Mailing Address 879 SOMERSET LANE

City State Zip Code
EDMONDS WA 98020

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 ▼
2700.00

Transaction ID : SA17A.101171

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶ **3266.68**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHEN NORRIS

Mailing Address **PO BOX 77027**

City State Zip Code
TUCSON AZ 85703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PELPHREY PRODUCTIONS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.101232

Date of Receipt

08 / 23 / 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
GEORGE W. NORTHUP

Mailing Address **POBOX 163**

City State Zip Code
FORT CAMPBELL KY 42223

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 : SA17A.101267

Date of Receipt

08 / 19 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
BESS NORVILLE

Mailing Address **147 ROLLING MEADOWS DR**

City State Zip Code
JACKSON MS 39211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORVILLE CHIROPRACTIC OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
251.82

Transaction ID : SA17A.101329

Date of Receipt

09 / 14 / 2015

Amount of Each Receipt this Period

153.84

Subtotal Of Receipts This Page (optional)..... **903.84**

Total This Period (last page this line number only).....

SCHEDULE A-P

ITEMIZED RECEIPTS

 Use separate schedule(s)
for each category of the
Detailed Summary Page

 FOR LINE NUMBER:
(check only one)

PAGE 489 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) HATEM NOUR EL DEEN				Transaction ID : SA17A.101388	
Mailing Address 317 ZENITH DRIVE				Date of Receipt MM / DD / YYYY 08 / 19 / 2015	
City EL PASO		State TX	Zip Code 79912		
FEC ID number of contributing federal political committee.			C		
Name of Employer EL PASO BEHAVIOR HEALTH HOSPITAL		Occupation PSYCHIATRIST, DIRECTOR OF THE MILITAF			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
				Amount of Each Receipt this Period 1000.00	
B. Full Name (Last, First, Middle Initial) LISA NOVACEK				Transaction ID : SA17A.101402	
Mailing Address 7103 PALUXY DRIVE				Date of Receipt MM / DD / YYYY 07 / 16 / 2015	
City IRVING		State TX	Zip Code 75039		
FEC ID number of contributing federal political committee.			C		
Name of Employer SELF-EMPLOYED		Occupation FINANCIAL SERVICES CONSULTANT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
				Amount of Each Receipt this Period 1000.00	
C. Full Name (Last, First, Middle Initial) TIMOTHY NOWLIN				Transaction ID : SA17A.101492	
Mailing Address PO BOX 16				Date of Receipt MM / DD / YYYY 08 / 22 / 2015	
City PICKWICK DAM		State TN	Zip Code 38365		
FEC ID number of contributing federal political committee.			C		
Name of Employer NOWLIN FINANCIAL LLC		Occupation PRESIDENT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 215.94			
				Amount of Each Receipt this Period 107.97	
Subtotal Of Receipts This Page (optional).....				2107.97	
Total This Period (last page this line number only)					

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TIMOTHY NOWLIN

Mailing Address **PO BOX 16**

City State Zip Code
PICKWICK DAM TN 38365

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NOWLIN FINANCIAL LLC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
492.12

Transaction ID : SA17A.101493

Date of Receipt
M M / D D / Y Y Y Y
09 30 2015

Amount of Each Receipt this Period
276.18

B. Full Name (Last, First, Middle Initial)
LARRY NUNEZ

Mailing Address **8308 CALERA DR.**

City State Zip Code
AUSTIN TX 78735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PLATINUM PIPE RENTALS LLC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.101596

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RALPH O'DELL

Mailing Address **245 CHESHIRE LANE**

City State Zip Code
PINEY FLATS TN 37686

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 : SA17A.101818

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **776.18**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RICK O'DELL		Transaction ID : SA17A.101820	
Mailing Address 1692 KINGS COURT		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2015	
City KINGS MILLS	State OH	Zip Code 45034	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RAYMOND JAMES FINANCIAL SERVICES	Occupation FINANCIAL ADVISOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="500.00"/>	
		Amount of Each Receipt this Period <input type="text" value="500.00"/>	

B. Full Name (Last, First, Middle Initial) DEE O'HARA		Transaction ID : SA17A.101839	
Mailing Address 499 HOLLYBERRY COURT		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2015	
City SAN JOSE	State CA	Zip Code 95129	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer NASA (RET'D) STILL WORKING PART TIME	Occupation REGISTERED NURSE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	
		Amount of Each Receipt this Period <input type="text" value="250.00"/>	

C. Full Name (Last, First, Middle Initial) PATRICK O'LEARY		Transaction ID : SA17A.101873	
Mailing Address 262 CPW		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2015	
City NYC	State NY	Zip Code 10024	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SELF	Occupation DOCTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="2500.00"/>	
		Amount of Each Receipt this Period <input type="text" value="2500.00"/>	

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM O'SHAUGHNESSY

Mailing Address **1 BROADCAST PLZ**

City **NEW ROCHELLE** State **NY** Zip Code **10801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WVOX** Occupation **PRESIDENT AND EDITORIAL DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **317.65**

Transaction ID : SA17A.101967

Date of Receipt
 M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
260.55

B. Full Name (Last, First, Middle Initial)
THOMAS O'SHEA

Mailing Address **26 CLUB DRIVE**

City **MASSAPEQUA** State **NY** Zip Code **11758**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOAD PLUMBING CORP** Occupation **MASTER PLUMBER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.101977

Date of Receipt
 M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
FREDERICKE OAKES

Mailing Address **1245 AMBLING WAY DR.**

City **MYRTLE BEACH** State **SC** Zip Code **29579-7523**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **282.83**

Transaction ID : SA17A.102004

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
82.83

Subtotal Of Receipts This Page (optional)..... **593.38**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FREDERICKE OAKES

Mailing Address 1245 AMBLING WAY DR.

City	State	Zip Code
MYRTLE BEACH	SC	29579-7523

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.102005

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			16			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JUD OAKES

Mailing Address 1664 AMSTER GROVE RD

City	State	Zip Code
WINCHESTER	KY	40391

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.102009

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER OAKLEY

Mailing Address 2 SLATE PATH DRIVE

City	State	Zip Code
THE WOODLANDS	TX	77382

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.102019

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			21			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROGER OBODICH

Mailing Address 1451 ALCAZAR AVE.

City State Zip Code
FIRT MYERS FL 33901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED ROGER R OBODICH INC CONSTRUCTION COMPANY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102083

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
TIM OBRIEN

Mailing Address 323 E. TIMBERLIN LANE

City State Zip Code
JASPER IN 47546

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 : SA17A.102151

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
ROBERT OCHS

Mailing Address 2502 FOREST PKWY.

City State Zip Code
WESTLAKE OH 44145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROBERT C. OCHS CO., LPA ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102208

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
REM OCULEE

Mailing Address 10940 WILSHIRE BLVD, 1600

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PLJ	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102256

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LARS BENNY OHLUND

Mailing Address 801 BRINY AVENUE

City	State	Zip Code
POMPANOM BEACH	FL	33062

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	FINANCIAL BUISNESS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.38

Transaction ID : SA17A.102466

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
210.38

C. Full Name (Last, First, Middle Initial)
ANNA OLEXY

Mailing Address 10042 DEL MONTE DR.

City	State	Zip Code
HOUSTON	TX	77042

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
GULF COAST LOGISTICS, INC	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102605

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 710.38

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL OLIVER

Mailing Address 7230 HUNTINGTON AVE

City State Zip Code
LINCOLN NE 68507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZOETIS SCIENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102710

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
EDWARD OLKKOLA

Mailing Address 3030 MCKINNEY AVE
APT 501

City State Zip Code
DALLAS TX 75204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TEAKWOOD CAPITAL INVESTMENT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.102740

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SEAN OLOUGHLIN

Mailing Address 215 EAST 24TH STREET # 823

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLOBAL BIOMECHANICAL SOLUTIONS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.102767

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ADAM OLSEN

Mailing Address **777 7TH STREET NW**
1102

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCONSET STRATEGIES LLC** Occupation **FOUNDING PARTNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.102775

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ADAM OLSEN

Mailing Address **777 7TH STREET NW**
1102

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCONSET STRATEGIES LLC** Occupation **FOUNDING PARTNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
608.23

Transaction ID : SA17A.102776

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
108.23

C. Full Name (Last, First, Middle Initial)
BRUCE OLSEN

Mailing Address **BOX 2774**

City **OVERGAARD** State **AZ** Zip Code **85933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.102788

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **858.23**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE OLSEN

Mailing Address **BOX 2774**

City State Zip Code
OVERGAARD AZ 85933

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 ▼
279.80

Transaction ID : SA17A.102789

Date of Receipt
M M / D D / Y Y Y Y
08 08 2015

Amount of Each Receipt this Period
29.80

B. Full Name (Last, First, Middle Initial)
TAMARA OLSEN

Mailing Address **1115 2ND AVE SOUTH**

City State Zip Code
CLINTON IA 52732

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 ▼
500.00

Transaction ID : SA17A.102827

Date of Receipt
M M / D D / Y Y Y Y
08 14 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ERIK OLSON

Mailing Address **777 N PASTORIA AVE**

City State Zip Code
SUNNYVALE CA 94085

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROEHAMPTON GROUP LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.102861

Date of Receipt
M M / D D / Y Y Y Y
08 21 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1529.80**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) STEPHEN OLSON		Transaction ID : SA17A.102905 Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 1700 FARNAM ST 1350 City OMAHA State NE Zip Code 68102		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer ENGLS KETCHAM OLSON AND KEITH	Occupation ATTORNEY	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial) GAIL ONESI		Transaction ID : SA17A.103004 Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2015
Mailing Address 165 SILVERTHORN DR City TYRONE State GA Zip Code 30290		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial) GREG ORDWAY		Transaction ID : SA17A.103102 Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address 3251 PINE TREE DRIVE City COLUMBIA State MO Zip Code 65201		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer KINGDOM PROPERTIES GROUP, LLC	Occupation REAL ESTATE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN ORENSTEIN

Mailing Address **20 CLOVEWOOD ROAD**

City State Zip Code
HIGH FALLS NY 12440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
236.95

Transaction ID : SA17A.103129

Date of Receipt
M M / D D / Y Y Y Y
08 28 2015

Amount of Each Receipt this Period
57.10

B. Full Name (Last, First, Middle Initial)
JAMES OSTRICH

Mailing Address **6106 LAPORT STREET**

City State Zip Code
LA MESA CA 91942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
QUALCOMM TECHNOLOGIES INC PROGRAM MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.103440

Date of Receipt
M M / D D / Y Y Y Y
07 27 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES OSTRICH

Mailing Address **6106 LAPORT STREET**

City State Zip Code
LA MESA CA 91942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
QUALCOMM TECHNOLOGIES INC PROGRAM MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.103441

Date of Receipt
M M / D D / Y Y Y Y
07 27 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **557.10**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PATRICIA OTANDER

Mailing Address 2252 BUTTS RD

City State Zip Code
ASHVILLE NY 14710

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 : SA17A.103499

Date of Receipt
MM / DD / YYYY
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARK OTTO

Mailing Address PO BOX 98298

City State Zip Code
LAS VEGAS NV 89193

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TIRE SHIELD INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
514.56

Transaction ID : SA17A.103568

Date of Receipt
MM / DD / YYYY
09 / 06 / 2015

Amount of Each Receipt this Period
514.56

C. Full Name (Last, First, Middle Initial)
ANDI OUSTALET

Mailing Address PO BOX O

City State Zip Code
GULFPORT MS 39502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.17

Transaction ID : SA17A.103595

Date of Receipt
MM / DD / YYYY
08 / 30 / 2015

Amount of Each Receipt this Period
107.97

Subtotal Of Receipts This Page (optional).....▶ 872.53

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAUL OWENS

Mailing Address 11701 CRESTWOOD ST.

City	State	Zip Code
LUMBERTON	TX	77657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2744.70

Transaction ID : SA17A.103748

Date of Receipt
MM / DD / YYYY
09 / 24 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
PAUL OWENS

Mailing Address 11701 CRESTWOOD ST.

City	State	Zip Code
LUMBERTON	TX	77657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149695

Date of Receipt
MM / DD / YYYY
09 / 24 / 2015

Redesignate: TO GENERAL 2016

Amount of Each Receipt this Period
-44.70

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PAUL OWENS

Mailing Address 11701 CRESTWOOD ST.

City	State	Zip Code
LUMBERTON	TX	77657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.149696

Date of Receipt
MM / DD / YYYY
09 / 24 / 2015

Redesignate: FROM PRIMARY 2016

Amount of Each Receipt this Period
44.70

[MEMO ITEM]

Subtotal Of Receipts This Page (optional).....▶ 2700.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHAUN OXTAL

Mailing Address **2320 W. AZEELE STREET
SUITE 320**

City State Zip Code
TAMPA FL 33609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPRIGHT REAL ESTATE VALUATION & CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
296.28

Transaction ID : SA17A.103804

Date of Receipt
M M / D D / Y Y Y Y
09 01 2015

Amount of Each Receipt this Period
296.28

B. Full Name (Last, First, Middle Initial)
NEIL PADRON

Mailing Address **8 BURNHAM LN**

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PETLAND DISCOUNTS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.103949

Date of Receipt
M M / D D / Y Y Y Y
08 23 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM PAILLEY

Mailing Address **1535 W. AUGUSTA AVE**

City State Zip Code
PHOENIX AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.104072

Date of Receipt
M M / D D / Y Y Y Y
08 02 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1046.28**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANN MARIE PALLAN

Mailing Address **89 TENTH STREET**

City State Zip Code
GARDEN CITY NY 11530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1426.52

Transaction ID : SA17A.104169

Date of Receipt
M M / D D / Y Y Y Y
08 25 2015

Amount of Each Receipt this Period
1426.52

B. Full Name (Last, First, Middle Initial)
ERIC PALMER

Mailing Address **815 STATE STREET
2**

City State Zip Code
NEW HAVEN CT 06511

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 ▼
257.10

Transaction ID : SA17A.104228

Date of Receipt
M M / D D / Y Y Y Y
09 12 2015

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
PEGGY PALMER

Mailing Address **1432 W. BEVERLY DR**

City State Zip Code
ANAHEIM CA 92801

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 ▼
280.22

Transaction ID : SA17A.104259

Date of Receipt
M M / D D / Y Y Y Y
08 15 2015

Amount of Each Receipt this Period
180.22

Subtotal Of Receipts This Page (optional).....▶ **1806.74**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

<p>A. Full Name (Last, First, Middle Initial) SUSAN PALMER</p> <p>Mailing Address 223 N GUADALUPE ST #300</p> <p>City: SANTA FE State: NM Zip Code: 87501</p> <p>FEC ID number of contributing federal political committee. <input style="width:100px;" type="text" value="C"/></p> <p>Name of Employer: PRIVATE Occupation: RN</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input style="width:100px;" type="text" value="1000.00"/></p>	<p>Transaction ID : SA17A.104271</p> <p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>11</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table> </p> <p>Amount of Each Receipt this Period <input style="width:100px;" type="text" value="1000.00"/></p>	M	M	/	D	D	/	Y	Y	Y	Y	07			11			2015			
M	M	/	D	D	/	Y	Y	Y	Y												
07			11			2015															

<p>B. Full Name (Last, First, Middle Initial) HENRIETTA PALUMBO</p> <p>Mailing Address 102 MILANO DRIVE</p> <p>City: ISLAMORADA State: FL Zip Code: 33036</p> <p>FEC ID number of contributing federal political committee. <input style="width:100px;" type="text" value="C"/></p> <p>Name of Employer: RETIRED Occupation: RETIRED</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input style="width:100px;" type="text" value="212.15"/></p>	<p>Transaction ID : SA17A.104326</p> <p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>08</td><td></td><td></td><td>18</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table> </p> <p>Amount of Each Receipt this Period <input style="width:100px;" type="text" value="136.89"/></p>	M	M	/	D	D	/	Y	Y	Y	Y	08			18			2015			
M	M	/	D	D	/	Y	Y	Y	Y												
08			18			2015															

<p>C. Full Name (Last, First, Middle Initial) RICHARD PAPE</p> <p>Mailing Address 47 BUDRON AVE</p> <p>City: SALEM State: NH Zip Code: 03079</p> <p>FEC ID number of contributing federal political committee. <input style="width:100px;" type="text" value="C"/></p> <p>Name of Employer: ALLSYSGO Occupation: PRESIDENT</p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input style="width:100px;" type="text" value="217.08"/></p>	<p>Transaction ID : SA17A.104507</p> <p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>19</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table> </p> <p>Amount of Each Receipt this Period <input style="width:100px;" type="text" value="217.08"/></p>	M	M	/	D	D	/	Y	Y	Y	Y	09			19			2015			
M	M	/	D	D	/	Y	Y	Y	Y												
09			19			2015															

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PHILIP PAPOOJIAN

Mailing Address **23 BLITHEWOOD TERRACE**

City **WORCESTER** State **MA** Zip Code **01604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PROTEX INTERNATIONAL** Occupation **COO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.104515

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JASON PARAVANO

Mailing Address **5895 AUSABLE WAY**

City **CENTREVILLE** State **VA** Zip Code **20121**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **LEATHER REPAIR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.104589

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GLEN PARKER

Mailing Address **2500 E. MAYA PALM DR.**

City **BOCA RATON** State **FL** Zip Code **33432**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.104753

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **850.00**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JASON PARKER

Mailing Address **2201 VETERANS MEMORIAL BLVD
SUITE 411**

City **METAIRIE** State **LA** Zip Code **70002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **PEDIATRIC DENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.104768

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JEFFREY PARKER

Mailing Address **1651 W HAMPTON RD**

City **OTHELLO** State **WA** Zip Code **99344**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **AGRICULTURE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.104772

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT B PARKER

Mailing Address **166 SHELL DRIVE**

City **BRUNSWICK** State **GA** Zip Code **31520**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRUNSWICK WINLECTRIC** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.104843

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
209.69

Subtotal Of Receipts This Page (optional)..... **3159.69**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALLAN PARR

Mailing Address **7015 EAST SERVICE RD HWY 190**

City **COVINGTON** State **LA** Zip Code **70433**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NIPM** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.104932

Date of Receipt

08 / 12 / 2015

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
BRAD PARSCALE

Mailing Address **321 6TH STREET**

City **SAN ANTONIO** State **TX** Zip Code **78215**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GILES-PARSCALE** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105039

Date of Receipt

08 / 06 / 2015

Amount of Each Receipt this Period

484.99

C. Full Name (Last, First, Middle Initial)
RITA PARSCALE

Mailing Address **908 LA PUERTA**

City **SAN ANTONIO** State **TN** Zip Code **78258**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105041

Date of Receipt

08 / 06 / 2015

Amount of Each Receipt this Period

260.81

Subtotal Of Receipts This Page (optional).....▶ **3445.80**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RITA PARSCALE

Mailing Address 908 LA PUERTA

City	State	Zip Code
SAN ANTONIO	TN	78258

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105042

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DAVID PARSONS

Mailing Address 5446 NOTT ROAD

City	State	Zip Code
CANANDAIGUA	NY	14424

FEC ID number of contributing federal political committee.

Name of Employer STONESTEELWOOD	Occupation SELF EMPLOYED
------------------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105070

Date of Receipt

M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
SHERRY PARTLOW

Mailing Address 100 KRISTI DRIVE

City	State	Zip Code
INDIAN HARBOR BEACH	FL	32937

FEC ID number of contributing federal political committee.

Name of Employer NATURES TRADING COMPANY	Occupation SALES
---	---------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105125

Date of Receipt

M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANSLEY PASCOLI

Mailing Address 160 ZEBLIN ROAD

City	State	Zip Code
ATLANTA	GA	30342

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 ▼
252.18

Transaction ID : SA17A.105184

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	5

Amount of Each Receipt this Period

57.10

B. Full Name (Last, First, Middle Initial)
MICHAEL PASLAVSKY

Mailing Address 6951 MANSE ST

City	State	Zip Code
FOREST HILLS	NY	11375

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 ▼
235.42

Transaction ID : SA17A.105211

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	5

Amount of Each Receipt this Period

235.42

C. Full Name (Last, First, Middle Initial)
STEPHEN L PASQUAN

Mailing Address PO BOX 516

City	State	Zip Code
BELVEDERE	CA	94920

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.105219

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ 1292.52

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEPHEN L PASQUAN

Mailing Address **PO BOX 516**

City	State	Zip Code
BELVEDERE	CA	94920

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.105220

Date of Receipt

08 / 04 / 2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
STEPHEN L PASQUAN

Mailing Address **PO BOX 516**

City	State	Zip Code
BELVEDERE	CA	94920

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2058.45

Transaction ID : SA17A.105221

Date of Receipt

09 / 24 / 2015

Amount of Each Receipt this Period

58.45

C. Full Name (Last, First, Middle Initial)
CINDY PATTEN

Mailing Address **120 MARGUERITE DR
STE 100**

City	State	Zip Code
CRANBERRY TWP	PA	16066

FEC ID number of contributing federal political committee.

C

Name of Employer
BRIAN PATTEN AND ASSOCIATES

Occupation
CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
547.60

Transaction ID : SA17A.105397

Date of Receipt

09 / 12 / 2015

Amount of Each Receipt this Period

413.66

Subtotal Of Receipts This Page (optional).....▶

1472.11

Total This Period (last page this line number only).....▶

1472.11

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GWEN PATTERSON

Mailing Address 4702 COUNTY ROAD 6300

City	State	Zip Code
LUBBOCK	TX	79415

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	DIRT CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105419

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
JENNIFER PATTERSON

Mailing Address 2310 W INTERSTATE 20, SUITE 100

City	State	Zip Code
ARLINGTON	TX	76017

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PEIRSONPATTERSON	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105423

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
RONALD PAWLACZYK

Mailing Address 908 S TONKEY RD

City	State	Zip Code
AUGRES	MI	48703

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RONALD PAWLACZYK	SELF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105725

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

<input type="text" value="161.12"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES PAXTON

Mailing Address 6909 BEACH BLVD

City	State	Zip Code
HUDSON	FL	34667

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TAMPA BAY BUILDERS, INC.	REAL ESTATE-DEVELOPEMENT, CONSTRU

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105748

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
DANIEL PEARSON

Mailing Address 604 ENCHANTED LN

City	State	Zip Code
BOSSIER CITY	LA	71111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105887

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial)
MR. JOHN E PEARSON

Mailing Address 62 MIDDLE DUNSTABLE ROAD

City	State	Zip Code
NASHUA	NH	03062

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EQUIVISE	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.105899

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT A PEIPOCK

Mailing Address 1101 ROSS MOUNTAIN PARK ROAD

City State Zip Code
NEW FLORENCE PA 15944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.106125

Date of Receipt

M M / D D / Y Y Y Y
09 02 2015

Amount of Each Receipt this Period

225.00

B. Full Name (Last, First, Middle Initial)
ROBERT A PEIPOCK

Mailing Address 1101 ROSS MOUNTAIN PARK ROAD

City State Zip Code
NEW FLORENCE PA 15944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.106126

Date of Receipt

M M / D D / Y Y Y Y
09 30 2015

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)
TRACEY PELTON

Mailing Address 7 BRAEBURN RD

City State Zip Code
CHELMSFORD MA 01824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PROCON EXECUTIVE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.106219

Date of Receipt

M M / D D / Y Y Y Y
08 05 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **550.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID PERRY

Mailing Address 703 ALLISON ROAD

City State Zip Code
PINEY FLATS TN 37686

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JOHNSON CITY CHIROPRACTIC CLINIC PC CHIROPRACTIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.106740

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ALFRED PERSSON

Mailing Address 35099 STATE HWY 74
F3

City State Zip Code
HEMET CA 92545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAB CHRISTIAN INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.106863

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
ALFRED PERSSON

Mailing Address 35099 STATE HWY 74
F3

City State Zip Code
HEMET CA 92545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAB CHRISTIAN INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.106864

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 600.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ALFRED PERSSON Mailing Address 35099 STATE HWY 74 F3 City HEMET State CA Zip Code 92545 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer CAB CHRISTIAN INC Occupation CEO Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/>		Transaction ID : SA17A.106868 Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 107.97 <input type="text" value=""/>
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B. Full Name (Last, First, Middle Initial) DEBRA PETERS Mailing Address 5208 GORHAM COURT City TAMPA State FL Zip Code 33624 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> 500.00		Transaction ID : SA17A.106948 Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 500.00 <input type="text" value=""/>
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C. Full Name (Last, First, Middle Initial) DEBRA PETERS Mailing Address 5208 GORHAM COURT City TAMPA State FL Zip Code 33624 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> 554.17		Transaction ID : SA17A.106949 Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 54.17 <input type="text" value=""/>
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Subtotal Of Receipts This Page (optional)..... 662.14

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RICHARD PETERSON		Transaction ID : SA17A.107187
Mailing Address 1600 FIRESTONE PKWY		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
City AKRON	State OH	Amount of Each Receipt this Period 500.00
Zip Code 44301		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RICHARDS FENCE CO.	Occupation PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) JAMES PETROCELLI		Transaction ID : SA17A.107319
Mailing Address 100 COMAC STREET		Date of Receipt MM / DD / YYYY 08 / 14 / 2015
City RONKONKOMA	State NY	Amount of Each Receipt this Period 276.47
Zip Code 11779		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 276.47
Name of Employer J PETROCELLI CONTRACTING	Occupation CONSTRUCTION MANAGEMENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 276.47	

C. Full Name (Last, First, Middle Initial) VIRGINIA PHELAN		Transaction ID : SA17A.107604
Mailing Address P.O. BOX 643		Date of Receipt MM / DD / YYYY 09 / 12 / 2015
City WOODSTOCK	State VA	Amount of Each Receipt this Period 100.00
Zip Code 22664		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 274.69	

Subtotal Of Receipts This Page (optional)..... **876.47**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 521 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VIRGINIA PHELAN

Mailing Address P.O. BOX 643

City	State	Zip Code
WOODSTOCK	VA	22664

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.107605

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		12		2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
WARD PHELAN

Mailing Address 315 HEATHER DRIVE

City	State	Zip Code
HARLINGEN	TX	78552

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.107607

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN SR. & LINDA PIAZZA

Mailing Address 918 S 38TH PL

City	State	Zip Code
MOUNT VERNON	WA	98274

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.107914

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) LINDA PIAZZA Mailing Address 918 S 38TH City MOUNT VERNON State WA Zip Code 98274 FEC ID number of contributing federal political committee. C Name of Employer SELF EMPLOYED Occupation BROKER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 376.87		Transaction ID : SA17A.107917 Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2015 Amount of Each Receipt this Period 232.68
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B. Full Name (Last, First, Middle Initial) PEGGY PICHELMAN Mailing Address 2920 CASCO POINT ROAD City WAYZATA State MN Zip Code 55391 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 500.00		Transaction ID : SA17A.107961 Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015 Amount of Each Receipt this Period 500.00
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C. Full Name (Last, First, Middle Initial) RICHARD PIERCE Mailing Address PO BOX 328, 1 CHARLES DR City HANSON State MA Zip Code 02341 FEC ID number of contributing federal political committee. C Name of Employer RA PIERCE TRUCKING Occupation OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 250.00		Transaction ID : SA17A.108149 Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2015 Amount of Each Receipt this Period 250.00
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Subtotal Of Receipts This Page (optional)..... **982.68**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TYRONE PIKE

Mailing Address 3295 WOODSIDE RAOD

City	State	Zip Code
WOODSIDE	CA	94062

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CITRIX SYSTEMS, INC.	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.108276

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ELEONOR PIMENTEL

Mailing Address 590 N.W. 132, AVENUE

City	State	Zip Code
MIAMI	FL	33182

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.108340

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOHN PIPERATO

Mailing Address 23 ROMAN RD
P.O. BOX 475

City	State	Zip Code
THIELLS	NY	10984

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 ▼
291.51

Transaction ID : SA17A.108453

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period
291.51

Subtotal Of Receipts This Page (optional).....▶ 1041.51

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

DAVID PITCHKO

Mailing Address 5501A ALBRIDGE WAY

City	State	Zip Code
MT LAUREL	NJ	08110

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 : SA17A.108539

Date of Receipt

M M / D D / Y Y Y Y
07 / 04 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

LUISA PLANCHER

Mailing Address 3555 W. ACOMA DRIVE

City	State	Zip Code
PHOENIX	AZ	85053

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 ▼
343.09

Transaction ID : SA17A.108678

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period

260.55

C. Full Name (Last, First, Middle Initial)

JACK PLATE

Mailing Address 14445 E CHICAGO RD

City	State	Zip Code
SOMERSET	MI	49233

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation
ROSS DESIGN & ENGINEERING	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.108704

Date of Receipt

M M / D D / Y Y Y Y
07 / 05 / 2015

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....▶

1010.55

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JACK PLATE

Mailing Address 14445 E CHICAGO RD

City	State	Zip Code
SOMERSET	MI	49233

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ROSS DESIGN & ENGINEERING	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.108705

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			19			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RICHARD PODELL

Mailing Address 106 WAKEWA AVE

City	State	Zip Code
SOUTH BEND	IN	46617

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PODELL FUEL INJECTION	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.108885

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BERNARD POGUE

Mailing Address 20122 COOPERS GULCH TRAIL

City	State	Zip Code
KATY	TX	77449

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CANRIG DRILLING	TECHNICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.108942

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AL POLITOWSKI

Mailing Address 13002 MASON ESTATES CT.

City ST. LOUIS State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109069

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2015

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
JOSEPH POLSINELLO

Mailing Address 51 MILL STREET
UNIT 7

City HANOVER State MA Zip Code 02339

FEC ID number of contributing federal political committee. **C**

Name of Employer INLAND PROFESSIONAL CORPORATION Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109160

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 17 / 2015

Amount of Each Receipt this Period
 284.71

C. Full Name (Last, First, Middle Initial)
BOBBY POOLE

Mailing Address PO BOX 920

City DALLAS State NC Zip Code 28034

FEC ID number of contributing federal political committee. **C**

Name of Employer POOLE MOTOR COMPANY INC Occupation BUYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109269

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2015

Amount of Each Receipt this Period
 250.00

Subtotal Of Receipts This Page (optional).....▶ 1034.71

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) LOIS POPE Mailing Address 1720 S. OCEAN BLVD. City MANALAPAN State FL Zip Code 33462 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation HOMEMAKER HOMEMAKER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="260.55"/>		Transaction ID : SA17A.109366 Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015 Amount of Each Receipt this Period <input type="text" value="260.55"/>
---	--	---

B. Full Name (Last, First, Middle Initial) JEFF POPICK Mailing Address 1083 N COLLIER BLVD UNIT 404 City MARCO ISLAND State FL Zip Code 34145 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation SELF EMPLOYED ENTREPRENEUR Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="235.12"/>		Transaction ID : SA17A.109395 Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2015 Amount of Each Receipt this Period <input type="text" value="235.12"/>
---	--	---

C. Full Name (Last, First, Middle Initial) THERESA POPLAWSKI Mailing Address 3000 VIA VICTORIA City PALOS VERDES ESTATES State CA Zip Code 90274 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation RETIRED RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		Transaction ID : SA17A.109414 Date of Receipt M M / D D / Y Y Y Y 07 / 04 / 2015 Amount of Each Receipt this Period <input type="text" value="250.00"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DOMINICK PORRETTO		Transaction ID : SA17A.109482 Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2015	
Mailing Address 3881 CRYSTAL LAKE DR #4		Amount of Each Receipt this Period _____ 250.00	
City POMPANO BEACH	State FL		Zip Code 33064
FEC ID number of contributing federal political committee. C			
Name of Employer A NATIONAL ELECTRIC SVC INC.	Occupation STATE OF FLORIDA ELECTRICAL/SOLAR C		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00	

B. Full Name (Last, First, Middle Initial) CLINT PORTERFIELD		Transaction ID : SA17A.109561 Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2015	
Mailing Address 3093 VICTORIA FALLS DR		Amount of Each Receipt this Period _____ 201.16	
City BURLINGTON	State NC		Zip Code 27215
FEC ID number of contributing federal political committee. C			
Name of Employer A & B SIDING AND ROOFING	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 201.16	

C. Full Name (Last, First, Middle Initial) GLENN POSEY		Transaction ID : SA17A.109604 Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015	
Mailing Address 24006 LOWCOUNTRY HWY		Amount of Each Receipt this Period _____ 50.00	
City RUFFIN	State SC		Zip Code 29475
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00	

Subtotal Of Receipts This Page (optional).....▶ _____ 501.16

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GLENN POSEY

Mailing Address **24006 LOWCOUNTRY HWY**

City	State	Zip Code
RUFFIN	SC	29475

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 ▼
350.00

Transaction ID : SA17A.109605

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
GLENN POSEY

Mailing Address **24006 LOWCOUNTRY HWY**

City	State	Zip Code
RUFFIN	SC	29475

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 ▼
521.57

Transaction ID : SA17A.109606

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	5

Amount of Each Receipt this Period

171.57

C. Full Name (Last, First, Middle Initial)
TODD POTTER

Mailing Address **13000 SHERBURNE AV**

City	State	Zip Code
BECKER	MN	55308

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
T J POTTER TRUCKING INC	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.109744

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **521.57**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL POULTER

Mailing Address 234 W AVENUE L

City State Zip Code
SAN ANGELO TX 76903

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ACME MILLWORK, INC MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109808

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOHN POWELL

Mailing Address 5224 LYSANDER LANE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FIRST REGENTS BANC SERVICES, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109874

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
SCOTT POWELL

Mailing Address 1301 46TH STREET

City State Zip Code
SACRAMENTO CA 95819

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SACRAMENTO JET CENTER PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.109905

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TRAVIS POWELL

Mailing Address 41188 CR 38

City State Zip Code
FLEMING CO 80728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MVP'S FARRIER SERVICE, INC FARRIER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.109925

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID POWERS

Mailing Address 702 S. PEEK ROAD
SUITE 3

City State Zip Code
KATY TX 77450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RESIDENTIAL COMPLETIONS HOMEBUILDING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.109962

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
ROBERT POWERS

Mailing Address 5322 CATHERINE

City State Zip Code
COUNTRYSIDE IL 60525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHICAGO TUBE & IRON MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.110024

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
209.69

Subtotal Of Receipts This Page (optional).....▶ 720.24

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES POYTHRESS

Mailing Address 601 SQUAW CREEK ROAD

City State Zip Code
WILLOW PARK TX 76087

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 : SA17A.110054

Date of Receipt

08 / 06 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
CHARLES PRATT

Mailing Address 919 CAMINO CABALLO
NIPOMO, CA

City State Zip Code
NIPOMO CA 93444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.110129

Date of Receipt

08 / 06 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
LEONARD PRATTE

Mailing Address 1504 CEREZA DR SE

City State Zip Code
RIO RANCHO NM 87124

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 : SA17A.110178

Date of Receipt

08 / 18 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **750.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KIMBERLEY PRENDERGAST

Mailing Address 195 AZALEA DRIVE

City WINDSOR State PA Zip Code 17366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
243.75

Transaction ID : SA17A.110209

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

46.86

B. Full Name (Last, First, Middle Initial)
CLIFFORD N PRESCOTT

Mailing Address 6409 EDLOE STREET

City HOUSTON State TX Zip Code 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLUOR CORPORATION ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
245.57

Transaction ID : SA17A.110217

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period

245.57

C. Full Name (Last, First, Middle Initial)
NORM PRESSLEY

Mailing Address 7617 PEPITA WAY

City LA JOLLA State CA Zip Code 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.110253

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 542.43

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MELISSA PREWITT

Mailing Address **3886 PACES FERRY RD NW**

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Transaction ID : SA17A.110318

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ANTHONY PRICE

Mailing Address **485 PUDDINGSTONE DRIVE**

City	State	Zip Code
SAN DIMAS	CA	91773

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17A.110330

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
TERRENCE PRICE

Mailing Address **PO BOX 50**

City	State	Zip Code
GAZELLE	CA	96034

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	VINTAGE FERRARI DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.110420

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... 1500.00

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN PRIZER

Mailing Address **2360 HAMETOWN ROAD**

City **GLEN ROCK** State **PA** Zip Code **17327**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110602

Date of Receipt

07 / 08 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JOHN G PRODROMOS

Mailing Address **636 AMBLESIDE DR.**

City **DEERFIELD** State **IL** Zip Code **60015**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOWARD SAVINGS AND LOAN** Occupation **EMPLOYEE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110649

Date of Receipt

08 / 12 / 2015

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
PAUL PROSSER

Mailing Address **3816 HWY 257**

City **VIENNA** State **GA** Zip Code **31092**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110697

Date of Receipt

08 / 04 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **3200.00**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRETT PRUDHOMME

Mailing Address 172 BILL LLOYD RD

City PORT BARRE State LA Zip Code 70577

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TURNER SPECIALTY SERVICES INSPECTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110748

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
PETER PUELZL

Mailing Address P.O. BOX 278

City CHESTER State NY Zip Code 10918

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110868

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
PETER PUELZL

Mailing Address P.O. BOX 278

City CHESTER State NY Zip Code 10918

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.110869

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANK PUGNI

Mailing Address **500 NEW YORK AVE**
11

City **DUNEDIN** State **FL** Zip Code **34698**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CORRECTIVE THERAPY** Occupation **PHYICAL THERAIST, MASSAGE THERAPIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.110907

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SHERYL PURCELL

Mailing Address **14155 US HWY ONE**
SUITE 310

City **JUNO BEACH** State **FL** Zip Code **33408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.14

Transaction ID : SA17A.110999

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
210.14

C. Full Name (Last, First, Middle Initial)
JEFFREY PURTELL

Mailing Address **31 PLEASANT POINT DRIVE**

City **PORTSMOUTH** State **NH** Zip Code **03801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PURTELL INVESTMENT COMPANY, INC.** Occupation **ITINERANT PEDDLER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.111039

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1710.14**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID G PURYEAR

Mailing Address 3500 POPLAR SPRINGS RD

City State Zip Code
BYROMVILLE GA 31007

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 ▼
500.00

Transaction ID : SA17A.111053

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES PURYEAR

Mailing Address 90 MONACO WAY

City State Zip Code
HUNTSVILLE TX 77320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRUMLEY MANUFACTURING OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.85

Transaction ID : SA17A.111055

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
250.85

C. Full Name (Last, First, Middle Initial)
ADRELIA PUTMAN

Mailing Address 5708 ARMSTRONG

City State Zip Code
ANCHORAGE AK 99504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOA CSS1

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
201.59

Transaction ID : SA17A.111072

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
74.48

Subtotal Of Receipts This Page (optional).....▶ 825.33

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
H EDWARD QUAY

Mailing Address **21023 LOS CABOS CT.**

City **LAND O LAKES** State **FL** Zip Code **34637**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.111216

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM QUIGLEY

Mailing Address **18 LITTLE POND RD**

City **MANALAPAN** State **FL** Zip Code **33462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FITE SHAVELL** Occupation **REAL ESTATE BROKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.111276

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM QUIGLEY

Mailing Address **18 LITTLE POND RD**

City **MANALAPAN** State **FL** Zip Code **33462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FITE SHAVELL** Occupation **REAL ESTATE BROKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **306.25**

Transaction ID : SA17A.111277

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

56.25

Subtotal Of Receipts This Page (optional)..... **556.25**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALBERT RABIZADEH

Mailing Address 122 EAST 42 STREET SUITE 1015

City State Zip Code
NEW YORK NY 10168

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLOBAL ASSET MANAGEMENT CORP REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.111438

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RODERICK RACKLEY

Mailing Address 8250 CREEK HOLLOW ROAD

City State Zip Code
BOULDER CO 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ANTHEM DISPLAYS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.111474

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
FRANK RADASZEWSKI

Mailing Address 1205 HOWARD LN

City State Zip Code
GARLAND TX 75044

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 : SA17A.111484

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES RADCLIFFE

Mailing Address 100 PASSAIC AVENUE
SUITE 220

City State Zip Code
FAIRFIELD NJ 07004

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DENTISTRY TODAY SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.111501

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
BENJAMIN RAFAEL

Mailing Address 11111 BISCAYNE BLVD. #1900

City State Zip Code
MIAMI FL 33181

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CAPITAL B LLC TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.111579

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="292.47"/>

C. Full Name (Last, First, Middle Initial)
BENJAMIN RAFAEL

Mailing Address 11111 BISCAYNE BLVD. #1900

City State Zip Code
MIAMI FL 33181

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CAPITAL B LLC TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.111580

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="292.47"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RYAN RAINEY

Mailing Address **24047 BATT CORNER ROAD
DIXIE**

City **PARMA** State **ID** Zip Code **83660**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAINEY BROS. INC** Occupation **HEAVY HAUL TRUCKING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.111702

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
RYAN RAINEY

Mailing Address **24047 BATT CORNER ROAD
DIXIE**

City **PARMA** State **ID** Zip Code **83660**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAINEY BROS. INC** Occupation **HEAVY HAUL TRUCKING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.111703

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
MAUREEN RAMBO

Mailing Address **P.O. BOX 98**

City **SILVER SPRINGS** State **FL** Zip Code **34489**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
271.99

Transaction ID : SA17A.111789

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			21			2015			

Amount of Each Receipt this Period

171.99

Subtotal Of Receipts This Page (optional)..... **371.99**

Total This Period (last page this line number only).....

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) PAUL RAMPPELL			Transaction ID : SA17A.111872		
Mailing Address 237 RIDGEVIEW DRIVE			Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2015		
City	State	Zip Code			
PALM BEACH	FL	33480			
FEC ID number of contributing federal political committee.		C			
Name of Employer PAUL RAMPPELL		Occupation LAWYER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
			Amount of Each Receipt this Period 1000.00		

B. Full Name (Last, First, Middle Initial) LOUIS RAMPINO			Transaction ID : SA17A.111875		
Mailing Address 4250 N. VIRGINIA RD.			Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2015		
City	State	Zip Code			
LONG BEACH	CA	90807			
FEC ID number of contributing federal political committee.		C			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 298.24			
			Amount of Each Receipt this Period 149.12		

C. Full Name (Last, First, Middle Initial) GREGORY RAND			Transaction ID : SA17A.111957		
Mailing Address 29 LOCUST AVE			Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2015		
City	State	Zip Code			
RYE	NY	10580			
FEC ID number of contributing federal political committee.		C			
Name of Employer REVESTAMERICA LLC		Occupation TECHNOLOGY			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			
			Amount of Each Receipt this Period 500.00		

Subtotal Of Receipts This Page (optional).....▶ 1649.12

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DICK RANDALL

Mailing Address 22348 REGNART RD

City State Zip Code
CUPERTINO CA 95014

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 ▼
2700.00

Transaction ID : SA17A.111963

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DICK RANDALL

Mailing Address 22348 REGNART RD

City State Zip Code
CUPERTINO CA 95014

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 ▼
5200.00

Transaction ID : SA17A.111964

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JANICE RANDS

Mailing Address 169 OLD PARK WAY

City State Zip Code
LAKE MARY FL 32746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CUSTOM WINDOWS ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.28

Transaction ID : SA17A.112020

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JEANETTE RANOW		Transaction ID : SA17A.112067	
Mailing Address 7110 HUNDRED ACRE		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2015	
City COCOA	State FL	Zip Code 32927	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 64.59	
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 217.74	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) JAKE RASOR III		Transaction ID : SA17A.112170	
Mailing Address 308 CURL CREEK RD		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2015	
City GREENWOOD	State SC	Zip Code 29649	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00	
Name of Employer WHITEFORD'S INC	Occupation OWNER	Election Cycle-to-Date 2700.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) RYAN RATCHFORD		Transaction ID : SA17A.112184	
Mailing Address 5001 S ELY		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015	
City KENNEWICK	State WA	Zip Code 99337	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 148.40	
Name of Employer APOLLO MECHANICAL	Occupation CONSTRUCTION	Election Cycle-to-Date 288.96	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....	2912.99
Total This Period (last page this line number only).....	2912.99

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES RAYMOND

Mailing Address 1280 OLIVIA PARKWAY

City	State	Zip Code
HENDERSON	NV	89011

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 ▼
 _____ 300.00

Transaction ID : SA17A.112450

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

_____ 300.00

B. Full Name (Last, First, Middle Initial)
JEANNE READE

Mailing Address 1820 POINT SAN PEDRO ROAD

City	State	Zip Code
SAN RAFAEL	CA	94901

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ALTAPACIFIC BANK	BANK EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.112518

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
JEANNE READE

Mailing Address 1820 POINT SAN PEDRO ROAD

City	State	Zip Code
SAN RAFAEL	CA	94901

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ALTAPACIFIC BANK	BANK EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Transaction ID : SA17A.112519

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

_____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 650.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 547 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RALPH REAHARD

Mailing Address 15310 AMBERLY DRIVE SUITE 250

City	State	Zip Code
TAMPA	FL	33647

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
COMPASS MEDIA GROUP	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.112544

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL REARDON

Mailing Address PO BOX 8350

City	State	Zip Code
NEW YORK	NY	10116

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CIGNA	MD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.112581

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	5

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
GERARD REDA

Mailing Address 15 GREENWOOD LANE

City	State	Zip Code
SAINT JAMES	NY	11780

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BIG GEYSER INC.	COO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 319.39

Transaction ID : SA17A.112654

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period
 _____ 319.39

Subtotal Of Receipts This Page (optional).....▶ _____ 819.39

Total This Period (last page this line number only).....▶ _____

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 548 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) WILLIAM REEB Mailing Address 1309 S COLLEGE STREET City State Zip Code GEORGETOWN TX 78626 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation REEB MANAGEMENT INC OWNER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> 1000.00			Transaction ID : SA17A.112748 Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 1000.00		
B. Full Name (Last, First, Middle Initial) JOSEPH REECE Mailing Address 6982 MELBOURNE DR City State Zip Code FAYETTEVILLE NC 28314 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation MILITARY PARATROOPER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> 300.00			Transaction ID : SA17A.112756 Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 100.00		
C. Full Name (Last, First, Middle Initial) NANCY REED Mailing Address 2201 E. HICKORY HILL RD. City State Zip Code ARGYLE TX 76226 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation RETIRED RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> 2500.00			Transaction ID : SA17A.112827 Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> 2500.00		

Subtotal Of Receipts This Page (optional)..... 3600.00
Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WENDELL REEDER

Mailing Address P.O. BOX 1238

City	State	Zip Code
CLARKSVILLE	TX	75426

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	BUSINESS OWNER - RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112858

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GREGORY REESE

Mailing Address PO BOX 330161

City	State	Zip Code
SAN FRANCISCO	CA	94133

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112892

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
HANNE S. REESE

Mailing Address 205 NORTH MURRAY BLVD.
169

City	State	Zip Code
COLORADO SPRINGS	CO	80916

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112893

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 550 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHARON REESE

Mailing Address 3333 ALLEN PARKWAY,UNIT 1702

City HOUSTON State TX Zip Code 77019

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation DIVORCEE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112932

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
SHARON REESE

Mailing Address 3333 ALLEN PARKWAY,UNIT 1702

City HOUSTON State TX Zip Code 77019

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation DIVORCEE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112933

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			31			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
FRANK MITCHELL REEVES

Mailing Address 375 PATCHEN DRIVE

City LEXINGTON State KY Zip Code 40517-4310

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.112959

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

<input type="text" value="300.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM REID

Mailing Address 445 MADISON ST.

City	State	Zip Code
DENVER	CO	80206

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 ▼
 _____ 2700.00

Transaction ID : SA17A.113161

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

_____ 2700.00

B. Full Name (Last, First, Middle Initial)
JOHN REIFERS

Mailing Address 4416 TRAVIS STREET
206

City	State	Zip Code
DALLAS	TX	75205

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 ▼
 _____ 500.00

Transaction ID : SA17A.113171

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

_____ 500.00

C. Full Name (Last, First, Middle Initial)
TOM REVIER

Mailing Address 75382 350TH STREET

City	State	Zip Code
OLIVIA	MN	56277

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
REVIER CATTLE COMPANY	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 511.93

Transaction ID : SA17A.113661

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

_____ 511.93

Subtotal Of Receipts This Page (optional).....▶ _____ 3711.93

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 552 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial)**JOHN REYELT**

Mailing Address 1805 OAK N. STREET

City	State	Zip Code
MYRTLE BEACH	SC	29577

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLD CROWN MANAGEMENT, INCOccupation
PRESIDENT/CEO

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.113681

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)**FRANCIS REYNOLDS**

Mailing Address 81 LAKE SHORE RD

City	State	Zip Code
SALEM	NH	03079

FEC ID number of contributing
federal political committee.

C

Name of Employer
PIXARBIO CORPOccupation
CEO

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.113759

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			12			2015			

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)**JOSEPH REYNOLDS**

Mailing Address 801 SOUTH TEXAS ST.

City	State	Zip Code
DERIDDER	LA	70634

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
REAL ESTATE, OUTDOOR ADVERTISING,
COMM

Receipt For: 2016

 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.113774

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			24			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....

3450.00

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOSEPH REYNOLDS

Mailing Address 801 SOUTH TEXAS ST.

City State Zip Code
DERIDDER LA 70634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF REAL ESTATE, OUTDOOR ADVERTISING, C

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
307.78

Transaction ID : SA17A.113775

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
57.78

B. Full Name (Last, First, Middle Initial)
RUDOLPH RHEINSCHILD

Mailing Address 946 W STAFFORD RD

City State Zip Code
THOUSAND OAKS CA 91361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RWR HOMES, INC DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.113838

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHNNY RIBEIRO

Mailing Address 3983 S MCCARRAN BLVD,SUITE 321

City State Zip Code
RENO NV 89502

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 ▼
1000.00

Transaction ID : SA17A.113922

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1307.78

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID RICH

Mailing Address PO BOX 176895

City State Zip Code
FT MITCHELL KY 41017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SLICK ROLLERS LLC SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
258.18

Transaction ID : SA17A.114026

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

258.18

B. Full Name (Last, First, Middle Initial)
RICHARD RICH

Mailing Address 15547 N 77TH

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RR LOTION OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.114044

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT RICHARDS

Mailing Address 17400 DALLAS PARKWAY

City State Zip Code
DALLAS TX 75287

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYEED SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.71

Transaction ID : SA17A.114142

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Receipt this Period

230.71

Subtotal Of Receipts This Page (optional).....▶ 1488.89

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VICKIE RICHARDSON

Mailing Address **PO BOX 7545**

City State Zip Code
WINTER HAVEN FL 33883

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JUICE CONCENTRATES INTL INC SELF EMPLOYEED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
383.24

Transaction ID : SA17A.114265

Date of Receipt
M M / D D / Y Y Y Y
08 24 2015

Amount of Each Receipt this Period
383.24

B. Full Name (Last, First, Middle Initial)
BRIAN RINGLE

Mailing Address **9732 W P AVE**

City State Zip Code
KALAMAZOO MI 49009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EDWARD JONES INVESTMENTS FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.114773

Date of Receipt
M M / D D / Y Y Y Y
08 25 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRANDON RIPPEON

Mailing Address **10319 WESTLAKE DR #223**

City State Zip Code
BETHESDA MD 20817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CASHBANQUE BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
226.62

Transaction ID : SA17A.114843

Date of Receipt
M M / D D / Y Y Y Y
08 08 2015

Amount of Each Receipt this Period
126.62

Subtotal Of Receipts This Page (optional)..... **759.86**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM RITCHIE

Mailing Address **5302 BROOKEWAY DR**

City	State	Zip Code
BETHESDA	MD	20816

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 : SA17A.114902

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM RITCHIE

Mailing Address **5302 BROOKEWAY DR**

City	State	Zip Code
BETHESDA	MD	20816

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 ▼
500.00

Transaction ID : SA17A.114903

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
COL. RAY D RITTENHOUSE

Mailing Address **17318 ELVERSON OAKS DRIVE**

City	State	Zip Code
TOMBALL	TX	77377

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 ▼
300.00

Transaction ID : SA17A.114921

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **600.00**

Total This Period (last page this line number only).....▶

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
COL. RAY D RITTENHOUSE

Mailing Address 17318 ELVERSON OAKS DRIVE

City State Zip Code
TOMBALL TX 77377

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 ▼
400.00

Transaction ID : SA17A.114922

Date of Receipt

07 / **24** / **2015**

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
COL. RAY D RITTENHOUSE

Mailing Address 17318 ELVERSON OAKS DRIVE

City State Zip Code
TOMBALL TX 77377

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 ▼
500.00

Transaction ID : SA17A.114923

Date of Receipt

08 / **10** / **2015**

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
LEENA RIVINA

Mailing Address 501 MURPHY RANCH ROAD
410

City State Zip Code
MILPITAS CA 95035

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 : SA17A.115056

Date of Receipt

07 / **13** / **2015**

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **450.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOE G ROACH

Mailing Address 4993 LUSK LN

City State Zip Code
FLOWER MOUND TX 75028

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 : SA17A.115112

Date of Receipt

MM / DD / YYYY
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
EARL ROARK

Mailing Address 5758 RAMBLER ROSE WAY

City State Zip Code
WEST PALM BEACH FL 33415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZACHRY INDUSTRIAL SUPERINTENDANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
248.25

Transaction ID : SA17A.115136

Date of Receipt

MM / DD / YYYY
09 / 07 / 2015

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
LEWIS E ROBBINS

Mailing Address BOX 1418

City State Zip Code
FORT MYERS FL 33902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
258.56

Transaction ID : SA17A.115196

Date of Receipt

MM / DD / YYYY
09 / 10 / 2015

Amount of Each Receipt this Period

128.48

Subtotal Of Receipts This Page (optional).....▶ 428.48

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AMY ROBERTS

Mailing Address 15204 CASCADE BLUFF

City State Zip Code
AUSTIN TX 78738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROXANN TAYLOR & REALTORS ASSOC. REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
223.88

Transaction ID : SA17A.115258

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
213.88

B. Full Name (Last, First, Middle Initial)
GERALD ROBERTS

Mailing Address P O BOX 253

City State Zip Code
MOORESBURG TN 37811

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 : SA17A.115328

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MITCH ROBERTS

Mailing Address 17205 SOCKEYE DR

City State Zip Code
MOUNT VERNON WA 98274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DCOB INC GM

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.115403

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 713.88

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT L ROBERTSON

Mailing Address 3990 WASHINGTON ST

City	State	Zip Code
SAN FRANCISCO	CA	94118

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SCOTT L ROBERTSON	REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.115545

Date of Receipt

M M / D D / Y Y Y Y
07 / 05 / 2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
SCOTT L ROBERTSON

Mailing Address 3990 WASHINGTON ST

City	State	Zip Code
SAN FRANCISCO	CA	94118

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SCOTT L ROBERTSON	REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1120.76

Transaction ID : SA17A.115546

Date of Receipt

M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period

120.76

C. Full Name (Last, First, Middle Initial)
THELMA ROBERTSON

Mailing Address 15 WALNUT TREE LANE

City	State	Zip Code
COLD SPRING HARBOR	NY	11724

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 : SA17A.115557

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 1370.76

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TRICIA ROBERTSON

Mailing Address 3344 PEACHTREE RD. NE.
3902

City ATLANTA State GA Zip Code 30326

FEC ID number of contributing federal political committee. **C**

Name of Employer ELAINE WHITNEY DDS MS Occupation ORTHODONTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.115561

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STAN ROBICHAUX

Mailing Address 2023 E SIMS WAY #288

City PORT TOWNSEND State WA Zip Code 98368

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
201.92

Transaction ID : SA17A.115586

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
29.32

C. Full Name (Last, First, Middle Initial)
BENJAMIN ROBINSON

Mailing Address 323 E 8TH ST
APT 2A

City NEW YORK State NY Zip Code 10009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.47

Transaction ID : SA17A.115661

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
235.47

Subtotal Of Receipts This Page (optional).....▶ 514.79

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) FRANKLIN ROBINSON		Transaction ID : SA17A.115696	
Mailing Address 108 E3 COLLEGE AVENUE		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2015	
City HOLLY SPRINGS	State MS	Zip Code 38635	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer ROBINSON DRUG STORE	Occupation PHARMACIST		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) GEORGE ROBINSON		Transaction ID : SA17A.115702	
Mailing Address 5005 RIVERWAY 200		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2015	
City HOUSTON	State TX	Zip Code 77056	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00	
Name of Employer ANDERSON ROBINSON	Occupation INVETMENTS		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00	

C. Full Name (Last, First, Middle Initial) GEORGE ROBINSON		Transaction ID : SA17A.115703	
Mailing Address 5005 RIVERWAY 200		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2015	
City HOUSTON	State TX	Zip Code 77056	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 113.24	
Name of Employer ANDERSON ROBINSON	Occupation INVETMENTS		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2813.24	

Subtotal Of Receipts This Page (optional).....	3063.24
Total This Period (last page this line number only).....	3063.24

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFF ROBINSON

Mailing Address 365 RAMONA WAY

City State Zip Code
COSTA MESA CA 92627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SALES - SOIL STABILIZER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
266.79

Transaction ID : SA17A.115731

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
235.12

B. Full Name (Last, First, Middle Initial)
STEPHAN ROBINSON

Mailing Address 7918 BROADWAY
108

City State Zip Code
PEARLAND TX 77581

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARDENT REALTY GROUP REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.115796

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARK RODACK

Mailing Address 16051 COLLINS AVE. APT 3502

City State Zip Code
SUNNY ISLES BEACH FL 33160

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 : SA17A.115966

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 735.12

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN B. RODDEY

Mailing Address 12971 HIGHWAY 1

City	State	Zip Code
OIL CITY	LA	71061

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 ▼

 500.00

Transaction ID : SA17A.115974

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08		/	05		/	2015			

Amount of Each Receipt this Period

 500.00

B. Full Name (Last, First, Middle Initial)
GERARDO RODRIGUEZ

Mailing Address 315ALMERIA RD. APT 309

City	State	Zip Code
WEST PALM BEACH	FL	33405

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 : SA17A.116089

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08		/	11		/	2015			

Amount of Each Receipt this Period

 250.00

C. Full Name (Last, First, Middle Initial)
DAVID ROGERS

Mailing Address 428 PALM COURT

City	State	Zip Code
NAPLES	FL	34108

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 : SA17A.116276

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08		/	03		/	2015			

Amount of Each Receipt this Period

 250.00

Subtotal Of Receipts This Page (optional).....▶
 1000.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NORMAN ROGERS

Mailing Address **3750 S LAS VEGAS BLVD
APT 3507**

City **LAS VEGAS** State **NV** Zip Code **89158-4368**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.116370

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PETER ROGERS

Mailing Address **235 UNION ST BE**

City **SALEM** State **OR** Zip Code **97301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **REAL ESTATE BUILDING AND SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.116384

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROY ROGERS

Mailing Address **519 WILCOX AVE**

City **LOS ANGELES** State **CA** Zip Code **90004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.116419

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1250.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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(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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. BRUCE S ROGOW

Mailing Address **2441 SW 28TH AVE**

City State Zip Code
FORT LAUDERDALE FL 33312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRUCE ROGOW PA LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.116454

Date of Receipt
M M / D D / Y Y Y Y
09 11 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JEFFREY ROHRER

Mailing Address **837 VENICE BLVD**

City State Zip Code
VENICE BEACH CA 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MRS.BOND TV COMERCIAL PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.116485

Date of Receipt
M M / D D / Y Y Y Y
07 24 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WARREN ROLLMAN

Mailing Address **14150 ROLLMAN ROAD**

City State Zip Code
SHAWNEETOWN IL 62984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
204.04

Transaction ID : SA17A.116549

Date of Receipt
M M / D D / Y Y Y Y
09 29 2015

Amount of Each Receipt this Period
204.04

Subtotal Of Receipts This Page (optional).....▶ **1454.04**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALICE ROMANO

Mailing Address **6 MICHAEL COURT**

City State Zip Code
LAFAYETTE NJ 07848

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 : SA17A.116586

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROD ROMERO

Mailing Address **1431 NW 114TH AVENUE**

City State Zip Code
PLANTATION FL 33323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMONE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.116659

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROD ROMERO

Mailing Address **1431 NW 114TH AVENUE**

City State Zip Code
PLANTATION FL 33323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMONE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1049.66

Transaction ID : SA17A.116660

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
49.66

Subtotal Of Receipts This Page (optional)..... **1299.66**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) KEVIN ROONEY Mailing Address 905 W. 7TH ST. #336 City: FREDERICK State: MD Zip Code: 21701 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: MMG Occupation: CIVIL ENGINEER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="600.00"/>		Transaction ID : SA17A.116772 Date of Receipt: <input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2015"/> Amount of Each Receipt this Period: <input type="text" value="100.00"/>
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B. Full Name (Last, First, Middle Initial) KEVIN ROONEY Mailing Address 905 W. 7TH ST. #336 City: FREDERICK State: MD Zip Code: 21701 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: MMG Occupation: CIVIL ENGINEER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="700.00"/>		Transaction ID : SA17A.116773 Date of Receipt: <input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2015"/> Amount of Each Receipt this Period: <input type="text" value="100.00"/>
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C. Full Name (Last, First, Middle Initial) KEVIN ROONEY Mailing Address 905 W. 7TH ST. #336 City: FREDERICK State: MD Zip Code: 21701 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: MMG Occupation: CIVIL ENGINEER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="800.00"/>		Transaction ID : SA17A.116774 Date of Receipt: <input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2015"/> Amount of Each Receipt this Period: <input type="text" value="100.00"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KEVIN ROONEY

Mailing Address 905 W. 7TH ST. #336

City	State	Zip Code
FREDERICK	MD	21701

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MMG	CIVIL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Transaction ID : SA17A.116775

Date of Receipt

M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
MR. EUGENE H ROSENBERG

Mailing Address 28 PINNACLE MOUNTAIN RD

City	State	Zip Code
SIMSBURY	CT	06070

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PLANNED SALES	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.117033

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
HJ ROSENBERGER

Mailing Address 3303 RIVER FOREST DRIVE

City	State	Zip Code
RICHMOND	TX	77406

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RCON	MKTG

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
331.41

Transaction ID : SA17A.117052

Date of Receipt

M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶

650.00

Total This Period (last page this line number only).....▶

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**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MAICHEL ROSHDY

Mailing Address **2513 W CUTHBERT AVENUE**

City **MIDLAND** State **TX** Zip Code **79701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALBERTSONS** Occupation **HEALTH CARE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
208.00

Transaction ID : SA17A.117113

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY ROSIER

Mailing Address **2101 N. DUNDEE ST.**

City **TAMPA** State **FL** Zip Code **33629**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRIDE RISK SOLUTIONS** Occupation **FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.117121

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
MICHAEL ROSS

Mailing Address **3453 SOUTHDALE DR**

City **KETTERING** State **OH** Zip Code **45409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KBR** Occupation **ENGR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.117226

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional)..... **1525.00**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 571 / 1212

<input type="checkbox"/> 16	<input checked="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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL ROSS

Mailing Address **3453 SOUTHDAL DR**

City **KETTERING** State **OH** Zip Code **45409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KBR** Occupation **ENGR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
582.83

Transaction ID : **SA17A.117227**

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
82.83

B. Full Name (Last, First, Middle Initial)
THOMAS ROSSER

Mailing Address **211 JUNIUS STREET**

City **THOMASVILLE** State **GA** Zip Code **31792**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
257.10

Transaction ID : **SA17A.117271**

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
57.10

C. Full Name (Last, First, Middle Initial)
FRANK & BARBARA ROWELL

Mailing Address **67 N COUNTRY GATE CIRCLE**

City **CONROE** State **TX** Zip Code **77384**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : **SA17A.117599**

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1139.93**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 572 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL ROY

Mailing Address RT. 4 BOX 392

City AVA	State MO	Zip Code 65608
-------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer
CHAIN ELECTRIC

Occupation
POWER LINEMAN

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

241.50

Transaction ID : SA17A.117693

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

138.40

B. Full Name (Last, First, Middle Initial)
CURTIS ROYS

Mailing Address 15497 RANCH ROAD 965

City FREDERICKSBURG	State TX	Zip Code 78624
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.117717

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ANGELA ROZEBOOM

Mailing Address 1185 MCCLELLAND ST SW

City GRANDVILLE	State MI	Zip Code 49418
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer
LIWS

Occupation
STUDENT & BUSINESS OWNER

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.117730

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			09			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... 1388.40

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER RUDDY

Mailing Address 1120 BEAR ISLAND DR

City WEST PALM BCH State FL Zip Code 33409

FEC ID number of contributing federal political committee. C

Name of Employer NEWSMAX MEDIA Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.117882

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JUAN RUIZ

Mailing Address 205 W 12TH STREET

City SAN JUAN State TX Zip Code 78589

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation PROPERTY TAX CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.118042

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
ROBERT RUPP

Mailing Address 2320 PLAZA DEL GRANDE

City LAS VEGAS State NV Zip Code 89102

FEC ID number of contributing federal political committee. C

Name of Employer DRAKE EQUIPMENT Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.118153

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 3200.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRISSAN RUSSELL

Mailing Address 4897 VICTORY STREET

City State Zip Code
BOZEMAN MT 59718

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 : SA17A.118266

Date of Receipt

08 / 28 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
D F RUSSELL

Mailing Address 6605 QUIET COVE CT

City State Zip Code
RALEIGH NC 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ITS SYSTEMS ADMIN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.118268

Date of Receipt

08 / 19 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
LUNDY RUSSELL

Mailing Address 381 LUNDY LANE

City State Zip Code
LAFAYETTE TN 37083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.118308

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL RYAN Mailing Address 1648 E. 2710 N. ROAD City MARTINTON State IL Zip Code 60901 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation STOR-LOC PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> <input type="text" value="1000.00"/>			Transaction ID : SA17A.118634 Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> <input type="text" value="1000.00"/>
B. Full Name (Last, First, Middle Initial) LESLIE RZESZUT Mailing Address 5430 AUDOBON AVE APT 105 City INVER GROVE HEIGHTS State MN Zip Code 55077 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation DEPT OF JUSTICE INTEL ANALYST Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> <input type="text" value="219.32"/>			Transaction ID : SA17A.118762 Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> <input type="text" value="19.32"/>
C. Full Name (Last, First, Middle Initial) RICARDO SABLAN Mailing Address 1555 ULUEO ST City KAILUA State HI Zip Code 96734 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer Occupation ALTRES, INC. CLIENT CARE SPECIALIST Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value=""/> <input type="text" value="218.60"/>			Transaction ID : SA17A.118830 Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2015 Amount of Each Receipt this Period <input type="text" value=""/> <input type="text" value="168.60"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

PAGE 576 / 1212

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICARDO SABLAN

Mailing Address 1555 ULUEO ST

City State Zip Code
KAILUA HI 96734

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
ALTRES, INC. CLIENT CARE SPECIALIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
243.60

Transaction ID : SA17A.118831

Date of Receipt

M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
PATRICIA SABO

Mailing Address 13838 AMBERLEIGH ROAD

City State Zip Code
ORLANDO FL 32837

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
HOUGHTON MIFFLIN HARCOURT OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.24

Transaction ID : SA17A.118844

Date of Receipt

M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period

113.24

C. Full Name (Last, First, Middle Initial)
ANDREW SADANOWICZ

Mailing Address PO BOX 4138

City State Zip Code
TEQUESTA FL 33469

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 ▼
2729.80

Transaction ID : SA17A.118893

Date of Receipt

M M / D D / Y Y Y Y
08 07 2015

Amount of Each Receipt this Period

29.80

Subtotal Of Receipts This Page (optional).....▶ **168.04**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RAJA SADIQ

Mailing Address 1908 SAVANNA DR

City State Zip Code
CHAMPAIGN IL 61822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DANVILLE POLYCLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.118903

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RAJA SADIQ

Mailing Address 1908 SAVANNA DR

City State Zip Code
CHAMPAIGN IL 61822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DANVILLE POLYCLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
381.28

Transaction ID : SA17A.118904

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
131.28

C. Full Name (Last, First, Middle Initial)
TRACY SALAMANDER

Mailing Address 282 MILLSTREAM TER

City State Zip Code
COLORADO SPRINGS CO 80905

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 ▼
500.00

Transaction ID : SA17A.119056

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 881.28

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM SALMON

Mailing Address 3217 E. PIONEER PKWY

City	State	Zip Code
ARLINGTON	TX	76010

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUNRISE AUTOMOTIVE	OWR/MGR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119226

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			27			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
WILLIAM SALMON

Mailing Address 3217 E. PIONEER PKWY

City	State	Zip Code
ARLINGTON	TX	76010

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUNRISE AUTOMOTIVE	OWR/MGR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119227

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
LAJEAN SALONITES

Mailing Address 3206 WOODLEIGH LANE

City	State	Zip Code
CAMERON PARK	CA	95682

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119237

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KAREN SANAL

Mailing Address **6 BRITTON DRIVE**

City State Zip Code
FLEMINGTON NJ 08822

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 ▼
205.00

Transaction ID : SA17A.119436

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

170.00

B. Full Name (Last, First, Middle Initial)
ERIKA SANCHEZ

Mailing Address **4306 YOAKUM
SUITE 600**

City State Zip Code
HOUSTON TX 77006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VISTA ENERGY ADMIN ASST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
418.80

Transaction ID : SA17A.119465

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			21			2015			

Amount of Each Receipt this Period

418.80

C. Full Name (Last, First, Middle Initial)
ERIKA SANCHEZ

Mailing Address **4306 YOAKUM
SUITE 600**

City State Zip Code
HOUSTON TX 77006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VISTA ENERGY ADMIN ASST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
513.86

Transaction ID : SA17A.119466

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

95.06

Subtotal Of Receipts This Page (optional)..... **683.86**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIKA SANCHEZ

Mailing Address 4306 YOAKUM
SUITE 600

City HOUSTON State TX Zip Code 77006

FEC ID number of contributing federal political committee.

Name of Employer VISTA ENERGY Occupation ADMIN ASST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119467

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOELLEN SANDERSON

Mailing Address 3281 LAKEMONT DRIVE

City EUGENE State OR Zip Code 97408

FEC ID number of contributing federal political committee.

Name of Employer AMVESCO, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119622

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAIME SANDOVAL

Mailing Address 1301 SANTA FE ST
SUITE B

City CORPUS CHRISTI State TX Zip Code 78404

FEC ID number of contributing federal political committee.

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.119654

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAIME SANDOVAL

Mailing Address 1301 SANTA FE ST
SUITE B

City State Zip Code
CORPUS CHRISTI TX 78404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17A.119655

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PENNY SANDS

Mailing Address 12727 SW 18TH ST

City State Zip Code
YUKON OK 73099

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 ▼
500.00

Transaction ID : SA17A.119673

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PENNY SANDS

Mailing Address 12727 SW 18TH ST

City State Zip Code
YUKON OK 73099

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 ▼
600.00

Transaction ID : SA17A.119674

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAY SANDSTROM

Mailing Address 3060 94 AVE NW

City State Zip Code
NEW TOWN ND 58763

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JMS CONSULTING LLC OIL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.119676

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
STEPHEN SANGER

Mailing Address 13315 NANTUCKET PLACE

City State Zip Code
BAKERSFIELD CA 93314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MARTHA H SANGER DDS INC MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.119714

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
THOMAS SANSONE

Mailing Address PO BOX 1107

City State Zip Code
RANCHO SANTA FE CA 92067

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 ▼
2700.00

Transaction ID : SA17A.119743

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. RONALD S SANTILLI

Mailing Address **20 MARSHALL PATH**

City	State	Zip Code
ACTON	MA	01720

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **300.00**

Transaction ID : SA17A.119812

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

_____ 300.00

B. Full Name (Last, First, Middle Initial)
JOSEPH SANTUCCI

Mailing Address **3315 ALGONQUIN ROAD
600**

City	State	Zip Code
ROLLING MEADOWS	IL	60008

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JSAI	CIVIL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **250.00**

Transaction ID : SA17A.119871

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period

_____ 100.00

C. Full Name (Last, First, Middle Initial)
JACOB S SARABIAN

Mailing Address **6828 E CARMALEE LANE**

City	State	Zip Code
FRESNO	CA	93727

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
STUDENT	STUDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **260.55**

Transaction ID : SA17A.119900

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period

_____ 260.55

Subtotal Of Receipts This Page (optional)..... **660.55**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JACOB S SARABIAN			Transaction ID : SA17A.119901																						
Mailing Address 6828 E CARMALEE LANE			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>16</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			16			2015			
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FRESNO	CA	93727																							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period																						
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B. Full Name (Last, First, Middle Initial) JACOB S SARABIAN			Transaction ID : SA17A.119902																						
Mailing Address 6828 E CARMALEE LANE			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>19</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			19			2015			
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09			19			2015																			
City	State	Zip Code																							
FRESNO	CA	93727																							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period																						
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STUDENT	STUDENT																								
Receipt For: 2016	Election Cycle-to-Date ▼																								
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									349.32																
C. Full Name (Last, First, Middle Initial) STUART SASSER			Transaction ID : SA17A.120025																						
Mailing Address P. O. BOX 907			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>22</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			22			2015			
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08			22			2015																			
City	State	Zip Code																							
CORPUS CHRISTI	TX	78403																							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period																						
Name of Employer	Occupation		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>209.69</td> </tr> </table>																						209.69
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SELF	RANCHER																								
Receipt For: 2016	Election Cycle-to-Date ▼																								
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>209.69</td> </tr> </table>																					209.69			
									209.69																

Subtotal Of Receipts This Page (optional).....▶

									298.46

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL SASSO

Mailing Address **932 KERWOOD CIRCLE**

City State Zip Code
OVIEDO FL 32765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MICHAEL C SASSO, PA LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.03

Transaction ID : SA17A.120030

Date of Receipt
M M / D D / Y Y Y Y
09 12 2015

Amount of Each Receipt this Period
158.83

B. Full Name (Last, First, Middle Initial)
FRAML SATERIALE

Mailing Address **PO BOX 80509**

City State Zip Code
STONEHAM MA 02180

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 : SA17A.120041

Date of Receipt
M M / D D / Y Y Y Y
09 30 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROGER SAUSE

Mailing Address **14484 GRANDIFLORAS ROAD**

City State Zip Code
CANYON COUNTRY CA 91387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF MUSICAL PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.120139

Date of Receipt
M M / D D / Y Y Y Y
08 05 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1408.83**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 586 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANCIS J SAUSER

Mailing Address 3211 34TH STREET

City State Zip Code
ROCK ISLAND IL 61201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.120143

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MORTON SAVELL

Mailing Address 1648 LAKE CHRISTOPHER DR.

City State Zip Code
VIRGINIA BEACH VA 23464

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A-1 AMERICAN SERVICES, INC. BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.120210

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRUCE SAWYER

Mailing Address 4 WATERBURY CT.

City State Zip Code
BALTIMORE MD 21212

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 : SA17A.120246

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MS. CYNTHIA G SAYRE

Mailing Address 4020 SIERRA COLLEGE BLVD 200

City	State	Zip Code
ROCKLIN	CA	95677

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WESTERN CARE CHILDREN'S ORPHANAGE	CHILDREN'S ORPHANAGE EMPLOYEE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17A.120332

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period
 _____ 2700.00

B. Full Name (Last, First, Middle Initial)
CECIL F SCANTLIN

Mailing Address 10 CLEAR SPRINGS CT

City	State	Zip Code
SUGAR LAND	TX	77479

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SUNBELT MACHINE WORKS	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.120389

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES E SCHAFFER

Mailing Address 24 BUBBLING BROOK RD

City	State	Zip Code
WALPOLE	MA	02061

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17A.120547

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period
 _____ 400.00

Subtotal Of Receipts This Page (optional).....▶ _____ 4100.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. NORMAN J SCHIEFFLER JR

Mailing Address 184 AUBREY DR

City HOUMA State LA Zip Code 70360

FEC ID number of contributing federal political committee. **C**

Name of Employer GATOR CRANE SERVICE Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.120827

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PATRICK M. SCHMIDT

Mailing Address 1601 OLD GREENSBORO ROAD

City KERNERSVILLE State NC Zip Code 27284

FEC ID number of contributing federal political committee. **C**

Name of Employer FFF ENTERPRISES, INC. Occupation HEALTHCARE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.121101

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THOMAS SCHMIDT

Mailing Address 141 WESTLEY ROAD

City OLD BRIDGE State NJ Zip Code 08857

FEC ID number of contributing federal political committee. **C**

Name of Employer CISCO SYSTEMS Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121141

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOHN SCHMIEDING		Transaction ID : SA17A.121147	
Mailing Address 434 PUTTER POINT COURT		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2015	
City NAPLES	State FL	Zip Code 34103	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00	
Name of Employer ARTHREX INC		Occupation ATTORNEY	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00	

B. Full Name (Last, First, Middle Initial) TIMOTHY SCHMITT		Transaction ID : SA17A.121195	
Mailing Address 10775 NADORFF RD		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2015	
City GREENVILLE	State IN	Zip Code 47124	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer JOHN KENYON AMERICAN EYE INSTITUTE		Occupation OPHTHALMOLOGIST	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) STEPHANIE SCHNEIDER		Transaction ID : SA17A.121280	
Mailing Address 4824 E 18TH AVE		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2015	
City DENVER	State CO	Zip Code 80220	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 215.08	
Name of Employer CODE42		Occupation SALES	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 215.08	

Subtotal Of Receipts This Page (optional).....	3165.08
Total This Period (last page this line number only).....	3165.08

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICKY SCHOBER

Mailing Address PO BOX 1267

City State Zip Code
ZACHARY LA 70791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTERGY I&C TECH

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121331

Date of Receipt
M M / D D / Y Y Y Y
07 / 07 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARTI SCHOEMAN

Mailing Address 30536 COVECREST CIRCLE

City State Zip Code
MENIFEE CA 92584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TERRACE LIVING CO., INC EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121350

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRIAN SCHROEDER

Mailing Address 1947 KETTLE CREEK DRIVE

City State Zip Code
DE PERE WI 54115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JACK SCHROEDER AND ASSOCIATES, INC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121580

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIAN SCHROEDER

Mailing Address 1947 KETTLE CREEK DRIVE

City State Zip Code
DE PERE WI 54115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JACK SCHROEDER AND ASSOCIATES, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.121581

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STEPHEN SCHROEDER SR

Mailing Address 3045 BAY VIEW DRIVE

City State Zip Code
LAKE SPIVEY GA 30236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCHROEDER INVESTMENTS LLC CONSTRUCTION WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121617

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JIRI SCHUBERT

Mailing Address 1160 W CONWAY DR NW

City State Zip Code
ATLANTA GA 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.H.HALLE ESTATE MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.121648

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS SCHULDNER

Mailing Address 11931 JEFFERSON AVE
125

City State Zip Code
NEWPORT NEWS VA 23606

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.121695

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BRAD SCHUMACHER

Mailing Address 318 S 5TH ST

City State Zip Code
ROCKPORT IN 47635

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF PHARMACIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.121840

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAMES SCHUMAN

Mailing Address 106 POGUE AVE.

City State Zip Code
EASTLAND TX 76448

FEC ID number of contributing federal political committee.

Name of Employer Occupation
J & J AIR CONDITIONING, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.121868

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
REBECCA SCHWARTZ

Mailing Address 30671 PASEO DEL NIGUEL

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ARTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.122004

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
GLORIA SCHWERIN

Mailing Address 3205 BALDWIN ROAD

City State Zip Code
METAMORA MI 48455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPECTRUM MEDICAL BILLING OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
232.26

Transaction ID : SA17A.122072

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
232.26

C. Full Name (Last, First, Middle Initial)
ROBERT SCIBETTI

Mailing Address 29 DAHLIA STREET

City State Zip Code
STATEN ISLAND NY 10312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUB PROPERTIES LLC REAL ESTATE MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.122105

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 732.26

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOSEPH SCOLARO		Transaction ID : SA17A.122149
Mailing Address 14 HEMINGWAY ST		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2015
City WINCHESTER	State MA	Zip Code 01890
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 113.50	
Name of Employer MCCOURT CONSTRUCTION	Occupation PROJECT SUPERINTENDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 205.89	

B. Full Name (Last, First, Middle Initial) AARON SCOTT		Transaction ID : SA17A.122170
Mailing Address 936 20TH STREET NW		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015
City HICKORY	State NC	Zip Code 28601
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer M.H. ALSHAYA COMPANY	Occupation MANAGER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) ALEXANDER SCOTT		Transaction ID : SA17A.122179
Mailing Address 2261E 15TH		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015
City LOS ANGELES	State CA	Zip Code 90021
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer A&S	Occupation BUSS OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Subtotal Of Receipts This Page (optional)..... **463.50**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 596 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DON SCOTT

Transaction ID : SA17A.122237

Mailing Address 575 COLLINS CREST ST.

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
	08			08				2015	

City	State	Zip Code
GLADSTONE	OR	97027

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Name of Employer RETIRED	Occupation RETIRED
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
ED SCOTT

Transaction ID : SA17A.122248

Mailing Address 13402 PEORIA AVE

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
	08			06				2015	

City	State	Zip Code
LUBBOCK	TX	79423

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

<input type="text" value="2000.00"/>

Name of Employer UNEMPLOYED	Occupation UNEMPLOYED
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2000.00"/>

C. Full Name (Last, First, Middle Initial)
ROBERT SCOTT

Transaction ID : SA17A.122372

Mailing Address 565 N.E. 27 TH CT.

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
	08			31				2015	

City	State	Zip Code
WILTON MANORS	FL	03334

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

<input type="text" value="107.97"/>

Name of Employer DIVERSIFIED CPC	Occupation ENGINEER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="215.94"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) STEVEN SEAT		Transaction ID : SA17A.122581	
Mailing Address 10022 DRIFTWOOD PARK DRIVE		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2015	
City HOUSTON	State TX	Zip Code 77095	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 138.61	
Name of Employer EPIC MANAGEMENT RESOURCES	Occupation ENGINEER	Election Cycle-to-Date 205.93	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) JEFFREY SEE		Transaction ID : SA17A.122669	
Mailing Address 2 INWOOD RD		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2015	
City SAN ANTONIO	State TX	Zip Code 78248	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer WORLD PASS, LLC	Occupation TRAVEL	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) KEN SEIBERT		Transaction ID : SA17A.122753	
Mailing Address 3210 OVERLOOK RIDGE ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2015	
City PROSPECT	State KY	Zip Code 40059	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer CMTA	Occupation ENGINEER	Election Cycle-to-Date 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Subtotal Of Receipts This Page (optional).....▶ 638.61

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DANIEL SEIDNER

Mailing Address PO BOX 49660

City State Zip Code
LOS ANGELES CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLEXWARE INTERNATIONAL LLC CTO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.122773

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARC SEIDNER

Mailing Address 234 CONWAY AVENUE

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF STOCK TRADER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.122777

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SELLITTI

Mailing Address 41 INDEPENDENCE DR

City State Zip Code
BASKING RIDGE NJ 07920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WJS FINANCIAL SERVICES, LLC CPA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.122896

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
260.55

Subtotal Of Receipts This Page (optional).....▶ 760.55

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN SEMINERIO

Mailing Address 115 ANN STREET

City State Zip Code
VALLEY STREAM NY 11580

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CITY OF NEW YORK SECURITY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.122944

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
CHARLES SERABIAN

Mailing Address 3550 GALT OCEAN DRIVE
1102

City State Zip Code
FT. LAUDERDALE FL 33308

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SUBWAY 200 INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.123016

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
STASIA SERAFINI

Mailing Address 33 ALPINE DRIVE

City State Zip Code
MOOSIC PA 18507

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.123017

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STASIA SERAFINI

Mailing Address 33 ALPINE DRIVE

City	State	Zip Code
MOOSIC	PA	18507

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.123018

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

<input type="text" value="111.02"/>

B. Full Name (Last, First, Middle Initial)
CHARLES SEVERINO

Mailing Address 1640 CAXAMBAS CT.

City	State	Zip Code
MARCO ISLAND	FL	34145

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.123154

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2015

Amount of Each Receipt this Period

<input type="text" value="121.64"/>

C. Full Name (Last, First, Middle Initial)
ERNEST M. SEXTON

Mailing Address 118 BEASLEY ROAD

City	State	Zip Code
CUSSETA	GA	31805

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DOD CIVILIAN	MOTOR VEHICLE OPERATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.123213

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period

<input type="text" value="118.51"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERNEST M. SEXTON

Mailing Address 118 BEASLEY ROAD

City	State	Zip Code
CUSSETA	GA	31805

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DOD CIVILIAN	MOTOR VEHICLE OPERATOR

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	
	331.75

Transaction ID : SA17A.123214

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

675.85	331.75	100.00
--------	--------	--------

B. Full Name (Last, First, Middle Initial)
DARIN SHAFFER

Mailing Address 5521 MURRAY AVENUE

City	State	Zip Code
MEMPHIS	TN	38119

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
USVERIFY	OWNER

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	
	325.85

Transaction ID : SA17A.123313

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

675.85	325.85
--------	--------

C. Full Name (Last, First, Middle Initial)
WILLIAM SHANAHAN

Mailing Address 20342 TANAGER PL

City	State	Zip Code
LEESBURG	VA	20175

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DEPT. OF COMMERCE	ATTORNEY

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	
	250.00

Transaction ID : SA17A.123383

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

675.85	250.00
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Subtotal Of Receipts This Page (optional).....▶ **675.85**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MATHIAS SHANER

Mailing Address **ONE PPG SUITE 2370**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SHANER INVESTMENTS** Occupation **BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.00

Transaction ID : SA17A.123395

Date of Receipt

09 / 10 / 2015

Amount of Each Receipt this Period

230.00

B. Full Name (Last, First, Middle Initial)
LAUREN SHARP

Mailing Address **5944LUTHER LANE
SUITE 5**

City **DALLAS** State **TX** Zip Code **75225**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GENESCO SPORTS ENTERPRISES** Occupation **SPORTS CONSULTING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
270.55

Transaction ID : SA17A.123560

Date of Receipt

09 / 18 / 2015

Amount of Each Receipt this Period

270.55

C. Full Name (Last, First, Middle Initial)
MAUREEN SHEA

Mailing Address **781 EAST BROADWAY**

City **SOUTH BOSTON** State **MA** Zip Code **02127**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.45

Transaction ID : SA17A.123735

Date of Receipt

08 / 23 / 2015

Amount of Each Receipt this Period

184.45

Subtotal Of Receipts This Page (optional)..... **685.00**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JAMES SHEALY Mailing Address PO BOX 710062 City: MAXEYS State: GA Zip Code: 30671 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: KAKEGA,LKC Occupation: FARMER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="350.00"/>			Transaction ID : SA17A.123754 Date of Receipt: MM / DD / YYYY 07 / 31 / 2015 Amount of Each Receipt this Period: <input type="text" value="250.00"/>
B. Full Name (Last, First, Middle Initial) JAMES SHEARER Mailing Address 1213 SW WINTERGREEN LN City: BLUE SPRINGS State: MO Zip Code: 64015 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: COMPUTER ENGINEERING Occupation: CEO Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="250.00"/>			Transaction ID : SA17A.123766 Date of Receipt: MM / DD / YYYY 08 / 06 / 2015 Amount of Each Receipt this Period: <input type="text" value="250.00"/>
C. Full Name (Last, First, Middle Initial) ROBERT SHEEHY Mailing Address 2175 ARROWHEAD DRIVE City: SANTA MARIA State: CA Zip Code: 93455 FEC ID number of contributing federal political committee: <input type="text" value="C"/> Name of Employer: SELF Occupation: FARMER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date: <input type="text" value="500.00"/>			Transaction ID : SA17A.123812 Date of Receipt: MM / DD / YYYY 08 / 06 / 2015 Amount of Each Receipt this Period: <input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AMY SHELDON

Mailing Address 3909 CHIMNEY ROCK DR

City State Zip Code
FLOWER MOUND TX 75022

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 ▼
2700.00

Transaction ID : SA17A.123868

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
AMY SHELDON

Mailing Address 3909 CHIMNEY ROCK DR

City State Zip Code
FLOWER MOUND TX 75022

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 ▼
2985.33

Transaction ID : SA17A.123869

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
285.33

C. Full Name (Last, First, Middle Initial)
AMY SHELDON

Mailing Address 3909 CHIMNEY ROCK DR

City State Zip Code
FLOWER MOUND TX 75022

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 ▼
3153.36

Transaction ID : SA17A.123870

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
168.03

Subtotal Of Receipts This Page (optional).....▶ 3153.36

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 605 / 1212					
<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"/>	
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) CARLA SHELDON			Transaction ID : SA17A.123872		
Mailing Address 1555 TIDAL MARSH LANE			Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2015		
City MOUNT PLEASANT		State SC	Zip Code 29226		
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>		
Name of Employer SELF		Occupation INVESTING			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>		
			Amount of Each Receipt this Period <input type="text" value="2700.00"/>		
B. Full Name (Last, First, Middle Initial) KEITH SHELDON			Transaction ID : SA17A.123882		
Mailing Address 3909 CHIMNEY ROCK DR			Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015		
City FLOWER MOUND		State TX	Zip Code 75022		
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>		
Name of Employer BERKSHIRE HATHAWAY AUTOMOTIVE		Occupation MANAGING PARTNER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>		
			Amount of Each Receipt this Period <input type="text" value="2700.00"/>		
C. Full Name (Last, First, Middle Initial) EDWIN SHELTON			Transaction ID : SA17A.123906		
Mailing Address 1020 WESTWOOD VILLAGE WAY SUITE 10			Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2015		
City MIDLOTHIAN		State VA	Zip Code 23114		
FEC ID number of contributing federal political committee.			<input type="text" value="C"/>		
Name of Employer SELF-EMPLOYED		Occupation COAL SALES			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <input type="text" value="250.00"/>		
			Amount of Each Receipt this Period <input type="text" value="250.00"/>		

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL SHEPARDSON		Transaction ID : SA17A.123965																				
Mailing Address 1635 ELIZABETHS WALK		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>14</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	07			14			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
07			14			2015																
City WINTER PARK	State FL	Zip Code 32789																				
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																				
Name of Employer PF, LLC	Occupation ADMINISTRATION																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>																				
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>																				

B. Full Name (Last, First, Middle Initial) JEFF SHERMAN		Transaction ID : SA17A.124061																				
Mailing Address 36 RUTLAND SQ		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>16</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	07			16			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
07			16			2015																
City BOSTON	State MA	Zip Code 02118																				
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																				
Name of Employer JP MORGAN	Occupation PORTFOLIO MANAGEMENT																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>																				
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>																				

C. Full Name (Last, First, Middle Initial) CHRIS SHERWIN		Transaction ID : SA17A.124137																				
Mailing Address 24823 NEWBERRY WAY		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>11</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	09			11			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
09			11			2015																
City PLAINFIELD	State IL	Zip Code 60585																				
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>																				
Name of Employer CITY OF NAPERVILLE	Occupation POLICE OFFICER																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																				
		Amount of Each Receipt this Period <input type="text" value="250.00"/>																				

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRIS SHERWIN

Mailing Address **24823 NEWBERRY WAY**

City State Zip Code
PLAINFIELD IL 60585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITY OF NAPERVILLE POLICE OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
281.46

Transaction ID : SA17A.124138

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	5

Amount of Each Receipt this Period
31.46

B. Full Name (Last, First, Middle Initial)
DAVID SHIMP

Mailing Address **1551 BEN SAWYER BLVD 4B**

City State Zip Code
MT. PLEASANT SC 29464

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAYBANK INDUSTRIES MARITIME

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
339.50

Transaction ID : SA17A.124230

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

Amount of Each Receipt this Period
339.50

C. Full Name (Last, First, Middle Initial)
SCOTT SHLEIFER

Mailing Address **9 WEST 57TH STREET**

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TIGER GLOBAL INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.124312

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **3070.96**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHARLOTTE SHOEMAKER

Mailing Address 5100 SW 111 LANE RD

City	State	Zip Code
OCALA	FL	34476

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.124346

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
MR. DM SIEGFRIED

Mailing Address 3113 S COLUMBIA CIRCLE

City	State	Zip Code
TULSA	OK	74105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.124805

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)
MR. DM SIEGFRIED

Mailing Address 3113 S COLUMBIA CIRCLE

City	State	Zip Code
TULSA	OK	74105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.124806

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

<input type="text" value="630.98"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

ROBERT SIERRA

Mailing Address 2774 AGUA FRIA STREET

City State Zip Code
SANTA FE NM 87507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA ELECTRONICS ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.124859

Date of Receipt

07 / 20 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

ROBERT SIERRA

Mailing Address 2774 AGUA FRIA STREET

City State Zip Code
SANTA FE NM 87507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIERRA ELECTRONICS ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
541.88

Transaction ID : SA17A.124860

Date of Receipt

08 / 20 / 2015

Amount of Each Receipt this Period

291.88

C. Full Name (Last, First, Middle Initial)

JASON SIFFORD

Mailing Address 500 MEFFORD LN

City State Zip Code
ALLEN TX 75013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTELOC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.124877

Date of Receipt

07 / 21 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **791.88**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BENJAMIN SILKOWITZ

Mailing Address 2249 VERMONT AVE

City State Zip Code
TOMS RIVER NJ 08755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PLUMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.124968

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
OBIE SILVERWOOD

Mailing Address 7001 PALOMINO DR.

City State Zip Code
SANGER CA 93657

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 ▼
219.71

Transaction ID : SA17A.125064

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CAROL SIMMONS

Mailing Address 11985 TURTLE BEACH RD

City State Zip Code
NORTH PALM BEACH FL 33408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIMMONS COMPANY INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125133

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHAD SIMMONS

Mailing Address 10101 WENONGA LANE

City State Zip Code
LEAWOOD KS 66206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIMMONS PRINCIPAL PROPERTIES FAMILY OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125135

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Amount of Each Receipt this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

B. Full Name (Last, First, Middle Initial)
ROBERT SIMMONS

Mailing Address 3110 JASMINE DR

City State Zip Code
DELRAY BEACH FL 33483

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 ▼
2700.00

Transaction ID : SA17A.125181

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	5

Amount of Each Receipt this Period

2	7	0	0	.	0	0
---	---	---	---	---	---	---

C. Full Name (Last, First, Middle Initial)
WILSONS SIMMONS

Mailing Address 170A DRIVE 32
PO BX 187

City State Zip Code
SHANNON MS 38868

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 ▼
500.00

Transaction ID : SA17A.125197

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

5	0	0	.	0	0
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Subtotal Of Receipts This Page (optional).....▶

3	4	5	0	.	0	0
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Total This Period (last page this line number only).....▶

3	4	5	0	.	0	0
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**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRIS SIMON

Mailing Address 1123 CECIL WATKINS ROAD

City ARNAUDVILLE State LA Zip Code 70512

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125217

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
STEVEN SIMON

Mailing Address 101 20TH ST, APT 3401

City MIAMI BEACH State FL Zip Code 33139

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation METAL FABRICATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.125260

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CHARLES SIMONYI

Mailing Address 110 84TH AVE NE

City MEDINA State WA Zip Code 98039

FEC ID number of contributing federal political committee. **C**

Name of Employer INTENTIONAL CORP Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.125308

Date of Receipt

M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶ **3950.00**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KEITH SIMS

Mailing Address 139 BLACKSMITHS DR

City	State	Zip Code
GEORGETOWN	TX	78633

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 : SA17A.125399

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
TIM SINES

Mailing Address 3041 UNIVERSITY AVE
SUITE 1

City	State	Zip Code
MORGANTOWN	WV	26505

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SUNCREST DENTAL GROUP	DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.125458

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
CODYE SINGLETON

Mailing Address 238 IRIS DRIVE

City	State	Zip Code
HENDERSONVILLE	TN	37075

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SINGLETON FAMILY PRACTICE	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.125513

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 750.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CODYE SINGLETON

Mailing Address 238 IRIS DRIVE

City State Zip Code
HENDERSONVILLE TN 37075

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SINGLETON FAMILY PRACTICE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
307.35

Transaction ID : SA17A.125514

Date of Receipt

M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period

57.35

B. Full Name (Last, First, Middle Initial)
MARK SINNING

Mailing Address 1217 PINE VALLEY DR

City State Zip Code
NEW BERN NC 28562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COASTAL VEIN & VASCULAR THORACIC SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125540

Date of Receipt

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
EDWARD J SINUSAS JR

Mailing Address 124 LAUDATEN WAY

City State Zip Code
WARWICK NY 10990

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 ▼
231.69

Transaction ID : SA17A.125550

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

131.69

Subtotal Of Receipts This Page (optional).....▶ 439.04

Total This Period (last page this line number only).....▶

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

RICK SKATES

Mailing Address 213 FOR STREET WEST

City State Zip Code
POLSON MT 59860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST CITIZENS BANK OF POLSON BANK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125683

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

LJUBO SKRBIC

Mailing Address 3230 S.OCEAN BL #103

City State Zip Code
PALM BEACH FL 33480

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 ▼
1000.00

Transaction ID : SA17A.125810

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

CAROLINE SKUDLAREK

Mailing Address 49 FRIGATE STREET

City State Zip Code
JAMESTOWN RI 02835

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAYSIDE OBGYN PHYSICIAN: OBGYN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
248.87

Transaction ID : SA17A.125833

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

248.87

Subtotal Of Receipts This Page (optional).....▶ 1498.87

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HARLAN SLABAUGH

Mailing Address 5225 E 71ST

City	State	Zip Code
INDPLS	IN	46220

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125850

Date of Receipt
MM / DD / YYYY
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT SLACK

Mailing Address PO BOX 298

City	State	Zip Code
GRAYSON	GA	30017

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 ▼
1000.00

Transaction ID : SA17A.125857

Date of Receipt
MM / DD / YYYY
08 / 28 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JAMES SLATE

Mailing Address 40 ROCKWOOD ROAD

City	State	Zip Code
LYNNFIELD	MA	01940

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BRIGHAM AND WOMEN'S HOSPITAL	CARDIAC SURGICAL ICU NURSE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.125893

Date of Receipt
MM / DD / YYYY
08 / 13 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1350.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES SLATE

Mailing Address **40 ROCKWOOD ROAD**

City **LYNNFIELD** State **MA** Zip Code **01940**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRIGHAM AND WOMEN'S HOSPITAL** Occupation **CARDIAC SURGICAL ICU NURSE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.125894

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JOSEPH SLAUGHTER

Mailing Address **315 MARKET ST.**

City **LAREDO** State **TX** Zip Code **78040**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **RANCHER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.125925

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RANDALL SLIMAK

Mailing Address **1528 WHITNEY ST**

City **SAN ANGELO** State **TX** Zip Code **76904**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SHANNON CLINIC** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.125986

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **850.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

(check only one)
 16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

SCOTT SLINKER

Mailing Address 200 N. ALMADEN BLVD,
250

City State Zip Code
SAN JOSE CA 95110

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PARADATA CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.125995

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)

LESLIE SLOAN

Mailing Address 8300 N. FM 620

City State Zip Code
AUSTIN, TEXAS TX 78726

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.126019

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

LEONARD SMART

Mailing Address 21131 N. 79TH PLACE

City State Zip Code
SCOTTSDALE AZ 85255

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THE LITTLE GYM INTERNATIONAL SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.126170

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P
ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

PAUL SMELLEY

Mailing Address 13944 ELAM LANE

City	State	Zip Code
NORTHPORT	AL	35475

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
DOUBLE DIAMOND CONSTRUCTION CO INC	CONSTRUCTION

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.126201

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	5

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

C L SMITH

Mailing Address P O BOX 1229

City	State	Zip Code
NEWCASTLE	OK	73072

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 ▼

1000.00

Transaction ID : SA17A.126356

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

CURTIS SMITH

Mailing Address 41 RUSKIN ST.

City	State	Zip Code
CHICOPEE	MA	01020

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
CONSTRUCTION	SELF EMPLOYED

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17A.126461

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

200.00

Subtotal Of Receipts This Page (optional).....

3900.00

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID SMITH

Mailing Address **2308 SUNRISE RIM ROAD**

City **BOISE** State **ID** Zip Code **83705**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
224.69

Transaction ID : SA17A.126511

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
224.69

B. Full Name (Last, First, Middle Initial)
DOUG SMITH

Mailing Address **2431 BIMINI LANE**

City **FORT LAUDERDALE** State **FL** Zip Code **33312**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FLORIDA CONTRACTORS INC** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.126564

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ERIN SMITH

Mailing Address **42 CEDAR DR**

City **RICHBORO** State **PA** Zip Code **18954**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THREATQUOTIENT** Occupation **VP OF ENGINEERING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
224.09

Transaction ID : SA17A.126581

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Receipt this Period
141.55

Subtotal Of Receipts This Page (optional).....▶ **1366.24**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ERIN SMITH			Transaction ID : SA17A.126582																						
Mailing Address 42 CEDAR DR			Date of Receipt																						
City RICHBORO State PA Zip Code 18954			<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>23</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			23			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			23			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer THREATQUOTIENT		Occupation VP OF ENGINEERING	57.10																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	281.19																						

B. Full Name (Last, First, Middle Initial) FRANK SMITH			Transaction ID : SA17A.126596																						
Mailing Address PO BOX 2798			Date of Receipt																						
City CORONA State CA Zip Code 92878			<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>13</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			13			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			13			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer FST SALES INC		Occupation EXEC.	2700.00																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	2700.00																						

C. Full Name (Last, First, Middle Initial) GLENN SMITH			Transaction ID : SA17A.126657																						
Mailing Address 415 W CAROL AVE			Date of Receipt																						
City SANTA ANA State CA Zip Code 92707			<table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>08</td><td></td><td></td><td>26</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			26			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			26			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer ATLAS		Occupation SALES	1000.00																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	1000.00																						

Subtotal Of Receipts This Page (optional).....▶ **3757.10**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES SMITH

Mailing Address 2772 ALMANOR DR WEST

City State Zip Code
CANYONDAM CA 95923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.126737

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES SMITH

Mailing Address PO BOX 7

City State Zip Code
SENECA SC 29679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.126739

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL J. SMITH, JR

Mailing Address 18 BIRCH POND DRIVE

City State Zip Code
SAUGUS MA 01906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SMITH FUNERAL SERVICE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
369.74

Transaction ID : SA17A.127452

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LECIA SMITH

Mailing Address 3245 LAUREL DRIVE

City State Zip Code
BLACKSBURG VA 24060

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 : SA17A.126932

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
LECIA SMITH

Mailing Address 3245 LAUREL DRIVE

City State Zip Code
BLACKSBURG VA 24060

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 ▼
421.74

Transaction ID : SA17A.126933

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

171.74

C. Full Name (Last, First, Middle Initial)
MARK SMITH

Mailing Address 60 E. MONROE ST.
UNIT 4806

City State Zip Code
CHICAGO IL 60603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.127003

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 671.74

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MARK SMITH		Transaction ID : SA17A.127004																					
Mailing Address PO BOX 3552		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>20</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			20			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			20			2015																	
City MUSCLE SHOALS	State AL	Zip Code 35662																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>52.27</td> </tr> </table>		52.27																			
52.27																							
Name of Employer STATE OF ALABAMA	Occupation ENGINEER TECH																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>252.27</td> </tr> </table>			252.27																			
252.27																							

B. Full Name (Last, First, Middle Initial) OAKLEY JASON SMITH		Transaction ID : SA17A.127119																					
Mailing Address 11924 FOREST HILL BLVD. SUITE 10A-342		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>13</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			13			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
09			13			2015																	
City WELLINGTON	State FL	Zip Code 33414																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>164.12</td> </tr> </table>		164.12																			
164.12																							
Name of Employer SELF-EMPLOYED	Occupation PROPERTY DEVELOPER																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>216.37</td> </tr> </table>			216.37																			
216.37																							

C. Full Name (Last, First, Middle Initial) TED SMITH		Transaction ID : SA17A.127334																					
Mailing Address 2221 ALTAMONT ROAD		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>06</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			06			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			06			2015																	
City GREENVILLE	State SC	Zip Code 29609																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																			
250.00																							
Name of Employer WHS PROPERITES LLC	Occupation OWNER																						
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>			250.00																			
250.00																							

Subtotal Of Receipts This Page (optional).....▶

466.39

Total This Period (last page this line number only).....▶

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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TERRY SMITH

Mailing Address 800 KIOWA DR E

City	State	Zip Code
LAKE KIOWA	TX	76240

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AMERICAN AIRLINES	PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.127340

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
PATRICIA E SNYDER

Mailing Address PO BOX 264

City	State	Zip Code
PHOENIX	AZ	85001-0264

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.127721

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
TANYA SNYDER

Mailing Address 11900 RIVER ROAD

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.127735

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GENE T SOLEM

Mailing Address 3412 COLONIAL DR

City	State	Zip Code
MODESTO	CA	95350

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 ▼
246.75

Transaction ID : SA17A.127897

Date of Receipt
MM / DD / YYYY
09 / 16 / 2015

Amount of Each Receipt this Period
82.25

B. Full Name (Last, First, Middle Initial)
LYNELL SOLOMAN

Mailing Address 1151 MERCHANT RD.

City	State	Zip Code
FORKS,	WA	98331

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DILLEY & SOLOMAN LOGGING	LOGGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
716.96

Transaction ID : SA17A.127923

Date of Receipt
MM / DD / YYYY
08 / 08 / 2015

Amount of Each Receipt this Period
716.96

C. Full Name (Last, First, Middle Initial)
LYNELL SOLOMAN

Mailing Address 1151 MERCHANT RD.

City	State	Zip Code
FORKS,	WA	98331

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DILLEY & SOLOMAN LOGGING	LOGGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1120.99

Transaction ID : SA17A.127924

Date of Receipt
MM / DD / YYYY
08 / 18 / 2015

Amount of Each Receipt this Period
404.03

Subtotal Of Receipts This Page (optional).....▶ 1203.24

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) LYNELL SOLOMAN Mailing Address 1151 MERCHANT RD. City FORKS, State WA Zip Code 98331 FEC ID number of contributing federal political committee. C Name of Employer Occupation DILLEY & SOLOMAN LOGGING LOGGER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 1178.31		Transaction ID : SA17A.127925 Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2015 Amount of Each Receipt this Period 57.32
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B. Full Name (Last, First, Middle Initial) LOUIS SORKOW Mailing Address 4345 IHLES ROAD City LAKE CHARLES State LA Zip Code 70605 FEC ID number of contributing federal political committee. C Name of Employer Occupation RETIRED RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 214.43		Transaction ID : SA17A.128127 Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2015 Amount of Each Receipt this Period 214.43
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C. Full Name (Last, First, Middle Initial) FRANK SOSSAMON Mailing Address 190 SOSSAMON LOOP City GAFFNEY State SC Zip Code 29340 FEC ID number of contributing federal political committee. C Name of Employer Occupation UTILITY CONST LINEMAN Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 240.00		Transaction ID : SA17A.128163 Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2015 Amount of Each Receipt this Period 240.00
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Subtotal Of Receipts This Page (optional)..... **511.75**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
A J SOUTHARD

Mailing Address 498 S PASEO REAL

City	State	Zip Code
ANAHEIM HILLS	CA	92807

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 500.00

Transaction ID : SA17A.128213

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
GERHARD SPANGENBERG

Mailing Address 200 LACUSTRIAN LN

City	State	Zip Code
CENTRAL	SC	29630

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 500.00

Transaction ID : SA17A.128350

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SPAUDE

Mailing Address 616 S ROLAND ST

City	State	Zip Code
BUSHNELL	FL	33513

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 250.00

Transaction ID : SA17A.128425

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶

1250.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ELLEN SPENCE

Mailing Address 3321 MANHATTAN BLVD

City	State	Zip Code
EVANSVILLE	IN	47711

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OTSUKA AMERICA PHARMACEUTICAL	ACCOUNT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.128576

Date of Receipt
M M / D D / Y Y Y Y
 /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ELLEN SPENCE

Mailing Address 3321 MANHATTAN BLVD

City	State	Zip Code
EVANSVILLE	IN	47711

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OTSUKA AMERICA PHARMACEUTICAL	ACCOUNT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.128577

Date of Receipt
M M / D D / Y Y Y Y
 /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ELLEN SPENCE

Mailing Address 3321 MANHATTAN BLVD

City	State	Zip Code
EVANSVILLE	IN	47711

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OTSUKA AMERICA PHARMACEUTICAL	ACCOUNT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.128578

Date of Receipt
M M / D D / Y Y Y Y
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Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ELLEN SPENCE

Mailing Address 3321 MANHATTAN BLVD

City State Zip Code
EVANSVILLE IN 47711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OTSUKA AMERICA PHARMACEUTICAL ACCOUNT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
811.47

Transaction ID : SA17A.128579

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
31.67

B. Full Name (Last, First, Middle Initial)
ROBERT L SPENCER JR

Mailing Address 13 CANOB LANE

City State Zip Code
WYOMING RI 02898

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE LEE COMPANY MACHINIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
266.80

Transaction ID : SA17A.128645

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
133.40

C. Full Name (Last, First, Middle Initial)
SUSAN SPEROS

Mailing Address 11 FALLIGANT AVE

City State Zip Code
SAVANNAH GA 31410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPEROS SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
516.46

Transaction ID : SA17A.128677

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period
16.46

Subtotal Of Receipts This Page (optional).....▶ 181.53

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MATTHEW L. SPICKARD

Mailing Address 3340 PEACHTREE RD.
SUITE 255

City ATLANTA State GA Zip Code 30326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRANSWESTERN REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.128703

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
260.55

B. Full Name (Last, First, Middle Initial)
JEFFREY SPIER

Mailing Address 7278 AMERICAN PRIDE STREET

City LAS VEGAS State NV Zip Code 89148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LUXOR HOTEL (MGM INTERNATIONAL) BARTENDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.128717

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
TERRYL SPIKER

Mailing Address 1205 SUNSET DRIVE/ P.O. BOX 255
1205 SUNSET DRIVE

City SYRACUSE State KS Zip Code 67878

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST NATIONAL BANK OF SYRACUSE BANKER/ FARMER- RANCHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.128727

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 760.55

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JANE SPILLANE

Mailing Address PO BOX 64

City MURRELLS INLET State SC Zip Code 29576

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED MANAGER MICKEY SPILLANE PUBLISHING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
285.98

Transaction ID : SA17A.128731

Date of Receipt
MM / DD / YYYY
08 / 25 / 2015

Amount of Each Receipt this Period
285.98

B. Full Name (Last, First, Middle Initial)
TERESA B SPRING

Mailing Address 9609 KINGSTON ROAD

City SHREVEPORT State LA Zip Code 71118

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 ▼
359.04

Transaction ID : SA17A.128908

Date of Receipt
MM / DD / YYYY
09 / 16 / 2015

Amount of Each Receipt this Period
164.23

C. Full Name (Last, First, Middle Initial)
TED SPRINKLE

Mailing Address 236 SHERWOOD FARM RD

City FAIRFIELD State CT Zip Code 06823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PET PARTNERS, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.128939

Date of Receipt
MM / DD / YYYY
08 / 03 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 700.21

Total This Period (last page this line number only).....▶

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) RICHARD SPROFERA			Transaction ID : SA17A.128945		
Mailing Address 369-B 3RD ST 367			Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2015		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN RAFAEL.	CA	94901	_____ _____ 250.00		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer	Occupation				
RETIRED	RETIRED				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			

B. Full Name (Last, First, Middle Initial) DAROLD STAGNER			Transaction ID : SA17A.129169		
Mailing Address 13901 MACKEY STRET			Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2015		
City	State	Zip Code	Amount of Each Receipt this Period		
OVERLAND PARK	KS	66223	_____ _____ 500.00		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer	Occupation				
SELF	FINANCIAL CONSULTANT				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00			

C. Full Name (Last, First, Middle Initial) ALEXANDRA STAINES			Transaction ID : SA17A.129202		
Mailing Address 34 HIGHVIEW DRIVE			Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015		
City	State	Zip Code	Amount of Each Receipt this Period		
RADNOR	PA	19087	_____ _____ 250.00		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer	Occupation				
RETIRED	RETIRED				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALEXANDRA STAINES

Mailing Address **34 HIGHVIEW DRIVE**

City **RADNOR** State **PA** Zip Code **19087**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
307.25

Transaction ID : SA17A.129203

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

57.25

B. Full Name (Last, First, Middle Initial)
GARY STANDIFORD

Mailing Address **1338E 510S**

City **LAFAYETTE** State **IN** Zip Code **47909**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.129330

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
KELLY STANTON

Mailing Address **2020 N ATLANTIC AVE
308N**

City **COCOA BEACH** State **FL** Zip Code **32931**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRESTIGE CONCRETE PRODUCTS** Occupation **COMMERCIAL SALES & MARKETING MGR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.129471

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **557.25**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) FREDERICK STAPON Mailing Address 4025 OAKLAWN AVE. EXT. City SOUTHOLD State NY Zip Code 11971 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 204.27		Transaction ID : SA17A.129516 Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2015 Amount of Each Receipt this Period 152.02
---	--	---

B. Full Name (Last, First, Middle Initial) STEPHEN STARKS Mailing Address P.O. BOX 400727 City LAS VEGAS State NV Zip Code 89140 FEC ID number of contributing federal political committee. C Name of Employer STARKS HOMES,LLC Occupation REAL ESTATE BROKER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 346.06		Transaction ID : SA17A.129555 Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015 Amount of Each Receipt this Period 220.20
---	--	---

C. Full Name (Last, First, Middle Initial) GEORGE STATHOPOULOS Mailing Address 22W435 AHLSTRAND ROAD City GLEN ELLYN State IL Zip Code 60137 FEC ID number of contributing federal political committee. C Name of Employer MIDWEST MEDICAL CONTRACTING Occupation CEO - PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 250.00		Transaction ID : SA17A.129631 Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2015 Amount of Each Receipt this Period 250.00
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Subtotal Of Receipts This Page (optional).....▶ **622.22**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 636 / 1212	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b
		<input type="checkbox"/> 18	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) DANIEL STEGLER Mailing Address 4744 FROST AVE City COLUMBUS State OH Zip Code 43228 FEC ID number of contributing federal political committee. C Name of Employer I.B.E.W 683 Occupation ELECTRICIAN Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SA17A.129852 Date of Receipt MM / DD / YYYY 08 / 10 / 2015 Amount of Each Receipt this Period 1000.00 Election Cycle-to-Date 1000.00
---	---

B. Full Name (Last, First, Middle Initial) ROBERT STEINBERG Mailing Address 71 SHORELAND DR City KEY LARGO State FL Zip Code 33037 FEC ID number of contributing federal political committee. C Name of Employer LAW OFFICES OF ROBERT L STEINBERG Occupation LAWYER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SA17A.129921 Date of Receipt MM / DD / YYYY 07 / 20 / 2015 Amount of Each Receipt this Period 1000.00 Election Cycle-to-Date 1000.00
--	---

C. Full Name (Last, First, Middle Initial) THOMAS STEINBRENNER Mailing Address 915 SAGEBRUSH PLACE City THOUSAND OAKS State CA Zip Code 91320 FEC ID number of contributing federal political committee. C Name of Employer TA STEINBRENNER & ASSOCIATES Occupation PRESIDENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SA17A.129927 Date of Receipt MM / DD / YYYY 07 / 02 / 2015 Amount of Each Receipt this Period 500.00 Election Cycle-to-Date 500.00
---	---

Subtotal Of Receipts This Page (optional).....	2500.00
Total This Period (last page this line number only).....	

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN STELMACHOWICZ

Mailing Address **901 N. PENN STREET
UNIT F1303**

City PHILADELPHIA	State PA	Zip Code 19123
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERIHEALTH CARITAS	Occupation DIRECTOR STRATEGIC ALLIANCES
--	---

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : **SA17A.129999**

Date of Receipt

M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

260.55

B. Full Name (Last, First, Middle Initial)
PAT STEPHENS

Mailing Address **8632 ELLARD DR**

City ALPHARETTA	State GA	Zip Code 30022
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : **SA17A.130122**

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CHARLES STEVENS

Mailing Address **4607 LINDBERGH DRIVE D-139-P**

City JACKSON	State MS	Zip Code 39209
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : **SA17A.130271**

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **1510.55**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LELAND STEVENS

Mailing Address 263 REMINGTON LANE

City State Zip Code
WEATHERFORD TX 76085

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 : SA17A.130324

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JAMES STEVER

Mailing Address 280 NE 51ST STREET

City State Zip Code
FORT LAUDERDALE FL 33334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN AIRLINES PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
286.72

Transaction ID : SA17A.130395

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period

286.72

C. Full Name (Last, First, Middle Initial)
JAMES STEVER

Mailing Address 280 NE 51ST STREET

City State Zip Code
FORT LAUDERDALE FL 33334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN AIRLINES PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
386.72

Transaction ID : SA17A.130396

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....▶ 636.72

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAYNA STEWART

Mailing Address 6112 WINTON ST

City State Zip Code
DALLAS TX 75214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ADVANCEPATH ACADEMICS EDUCATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.130462

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
DAYNA STEWART

Mailing Address 6112 WINTON ST

City State Zip Code
DALLAS TX 75214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ADVANCEPATH ACADEMICS EDUCATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
297.40

Transaction ID : SA17A.130463

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period

47.40

C. Full Name (Last, First, Middle Initial)
PHILLIP STEWART

Mailing Address 1126 S HWY 27

City State Zip Code
SOMERSET KY 42501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KEVIN STEWART INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.130550

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 547.40

Total This Period (last page this line number only).....▶

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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PHILLIP STEWART

Mailing Address 1126 S HWY 27

City SOMERSET State KY Zip Code 42501

FEC ID number of contributing federal political committee. C

Name of Employer KEVIN STEWART Occupation INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Transaction ID : SA17A.130551

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
SUSAN STEWART

Mailing Address 1060 BAYSHORE DRIVE

City CAMANO ISLAND State WA Zip Code 98282

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17A.130581

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
STANFORD STICKNEY

Mailing Address 40 FAIRVIEW PLAZA

City LOS GATOS State CA Zip Code 95030

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation HOUSEHOLD ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 245.65

Transaction ID : SA17A.130617

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

Amount of Each Receipt this Period

245.65

Subtotal Of Receipts This Page (optional).....▶

595.65

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
D MARK STIENHAUFF

Mailing Address **1380 PAJARO COURT**

City State Zip Code
AUBURN CA 95602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.130626

Date of Receipt

08 / 12 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
THOMAS D STIFFLER SR

Mailing Address **220 W WENER RD**

City State Zip Code
ENGLEWOOD OH 45322

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 : SA17A.130633

Date of Receipt

07 / 31 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
ANDREW STILES

Mailing Address **806 RHODE ISLAND AVE NW**

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FREE BEACON #1 TRUMP FAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
544.25

Transaction ID : SA17A.130640

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

514.23

Subtotal Of Receipts This Page (optional)..... **1014.23**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 642 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRIT STOCK

Mailing Address 3701 ACTON

City	State	Zip Code
FLOWER MOUND	TX	75022

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.130758

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="81.68"/>

B. Full Name (Last, First, Middle Initial)
JAMES STOCKSTILL

Mailing Address 313 TELLY RD PMB 20

City	State	Zip Code
PICAYUNE	MS	39466

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.130793

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
ARTHUR STONE

Mailing Address 314 HILLSIDE LANE

City	State	Zip Code
HADDONFIELD	NJ	08033

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.130906

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEFFERY STONE

Mailing Address **7227 WHITE BLOOM AVE**

City State Zip Code
LAS VEGAS NV 89117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BACK OFFICE REMEDIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.130950

Date of Receipt
M M / D D / Y Y Y Y
09 24 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DAVID STREET

Mailing Address **524 SILVER OAK GRV**

City State Zip Code
COLORADO SPRINGS CO 80906-8622

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 : SA17A.131293

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PATRICIA STREET

Mailing Address **14 FIVE MILE RIVER ROAD**

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOWN OF GREENWICH ADMINISTRATIVE ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
449.59

Transaction ID : SA17A.131305

Date of Receipt
M M / D D / Y Y Y Y
09 17 2015

Amount of Each Receipt this Period
367.49

Subtotal Of Receipts This Page (optional)..... **717.49**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 644 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) VICTOR STRINGER		Transaction ID : SA17A.131433		
Mailing Address 2739 SIGNAL PARKWAY		Date of Receipt MM / DD / YYYY 08 / 05 / 2015		
City SIGNAL HILL State CA Zip Code 90755				
FEC ID number of contributing federal political committee. <table border="1" style="margin-left: 100px;"> <tr><td>C</td></tr> </table>	C	Amount of Each Receipt this Period <table border="1" style="margin-left: 100px;"> <tr><td>500.00</td></tr> </table>		500.00
C				
500.00				
Name of Employer Occupation WADSWORTH REAL ESTATE HOLDING, LLC MANAGER				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="margin-left: 100px;"> <tr><td>500.00</td></tr> </table>		500.00	
500.00				

B. Full Name (Last, First, Middle Initial) MATTHEW STROBEL		Transaction ID : SA17A.131447		
Mailing Address 6226 RIME VILLAGE DR. APT. 205		Date of Receipt MM / DD / YYYY 09 / 20 / 2015		
City HUNTSVILLE State AL Zip Code 35806				
FEC ID number of contributing federal political committee. <table border="1" style="margin-left: 100px;"> <tr><td>C</td></tr> </table>	C	Amount of Each Receipt this Period <table border="1" style="margin-left: 100px;"> <tr><td>757.00</td></tr> </table>		757.00
C				
757.00				
Name of Employer Occupation SAIC, INC. SOFTWARE ENGINEER				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="margin-left: 100px;"> <tr><td>757.00</td></tr> </table>		757.00	
757.00				

C. Full Name (Last, First, Middle Initial) MATTHEW STROBEL		Transaction ID : SA17A.131448		
Mailing Address 6226 RIME VILLAGE DR. APT. 205		Date of Receipt MM / DD / YYYY 09 / 29 / 2015		
City HUNTSVILLE State AL Zip Code 35806				
FEC ID number of contributing federal political committee. <table border="1" style="margin-left: 100px;"> <tr><td>C</td></tr> </table>	C	Amount of Each Receipt this Period <table border="1" style="margin-left: 100px;"> <tr><td>757.00</td></tr> </table>		757.00
C				
757.00				
Name of Employer Occupation SAIC, INC. SOFTWARE ENGINEER				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="margin-left: 100px;"> <tr><td>1514.00</td></tr> </table>		1514.00	
1514.00				

Subtotal Of Receipts This Page (optional)

2014.00

Total This Period (last page this line number only)

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**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BEVERLY ANN STRONG

Mailing Address **833 EAST PARK
PO BOX 27**

City **ALAMO** State **TN** Zip Code **38001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.12

Transaction ID : SA17A.131501

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
235.12

B. Full Name (Last, First, Middle Initial)
LANE STUBBLEFIELD

Mailing Address **2001 RAYMOND AVE**

City **SIGNAL HILL** State **CA** Zip Code **90755**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.61

Transaction ID : SA17A.131618

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
59.61

C. Full Name (Last, First, Middle Initial)
LARRY STUBBS

Mailing Address **2304 MADRID DR**

City **INGLESIDE** State **TX** Zip Code **78362**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSTRUCTION MGR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.131626

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **544.73**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROCHELLE STUPPLE

Mailing Address **8901 ETIWANDA AVE**

City State Zip Code
NORTHRIDGE CA 91325

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 ▼
1000.00

Transaction ID : SA17A.131730

Date of Receipt

08 / 10 / 2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
CALVIN SUBER

Mailing Address **2008 CASA LINDA CT**

City State Zip Code
TALLAHASSEE FL 32303

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 : SA17A.131810

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
MR. BRIAN G SULLIVAN

Mailing Address **46 EATON RD**

City State Zip Code
NEEDHAM MA 02492

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEEDHAM TIRE, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.131935

Date of Receipt

09 / 24 / 2015

Amount of Each Receipt this Period

400.00

Subtotal Of Receipts This Page (optional)..... **1650.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
FRANK SULLIVAN

Mailing Address 2628 PEARL ROAD

City State Zip Code
MEDINA OH 44256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RPM INTERNATIONAL CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.131965

Date of Receipt

08 / 31 / 2015

Amount of Each Receipt this Period

209.69

B. Full Name (Last, First, Middle Initial)
TERRY SULLIVAN

Mailing Address 4 FOX RUN LANE

City State Zip Code
MARBLEHEAD MA 01945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REMAX ADVANTAGE REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.132067

Date of Receipt

08 / 18 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
THOMAS C. SULLIVAN JR.

Mailing Address 2628 PEARL ROAD

City State Zip Code
MEDINA OH 44256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RPM INTERNATIONAL INC. VICE PRESIDENT - CORPORATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.132077

Date of Receipt

08 / 25 / 2015

Amount of Each Receipt this Period

209.69

Subtotal Of Receipts This Page (optional).....▶ **669.38**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JACK SUTTON			Transaction ID : SA17A.132357																						
Mailing Address 950 SOUTH FOREST DRIVE			Date of Receipt																						
City JESUP		State GA	Zip Code 31545	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>24</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			24			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
07			24			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer SUTAIR, INC		Occupation PILOT / PRESIDENT		<table border="1"> <tr> <td colspan="10" style="text-align: right;">250.00</td> </tr> </table>		250.00																			
250.00																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼																						
				<table border="1"> <tr> <td colspan="10" style="text-align: right;">250.00</td> </tr> </table>		250.00																			
250.00																									

B. Full Name (Last, First, Middle Initial) AMANDA SWANSON			Transaction ID : SA17A.132509																						
Mailing Address 6725 MAPLEWOOD AVE			Date of Receipt																						
City SYLVANIA		State OH	Zip Code 43560	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>01</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			01			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			01			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer SELF-EMPLOYED		Occupation WRITER		<table border="1"> <tr> <td colspan="10" style="text-align: right;">1000.00</td> </tr> </table>		1000.00																			
1000.00																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼																						
				<table border="1"> <tr> <td colspan="10" style="text-align: right;">1000.00</td> </tr> </table>		1000.00																			
1000.00																									

C. Full Name (Last, First, Middle Initial) TIM TIMOTHY SWIGOR			Transaction ID : SA17A.132753																						
Mailing Address 126 FRONT ST			Date of Receipt																						
City MARBLEHEAD		State MA	Zip Code 01945	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>16</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			16			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			16			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer SELF-EMPLOYED		Occupation SALES - MARKETING		<table border="1"> <tr> <td colspan="10" style="text-align: right;">310.55</td> </tr> </table>		310.55																			
310.55																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼																						
				<table border="1"> <tr> <td colspan="10" style="text-align: right;">310.55</td> </tr> </table>		310.55																			
310.55																									

Subtotal Of Receipts This Page (optional).....▶

1560.55									
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Total This Period (last page this line number only).....▶

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RON SYLVEST

Mailing Address **7414 PICARDY AVE**

City **BATON ROUGE** State **LA** Zip Code **70808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ORTHOPEDIC SURGEON**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.132823

Date of Receipt

08 / 04 / 2015

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
EDDINA SYMNS

Mailing Address **1501 ROOSEVELT**

City **HUTCHINSON** State **KS** Zip Code **67501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.132853

Date of Receipt

07 / 07 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
CAROL SZABO

Mailing Address **8505 UNA AVE**

City **NAPERVILLE** State **IL** Zip Code **60565**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
202.38

Transaction ID : SA17A.132888

Date of Receipt

08 / 29 / 2015

Amount of Each Receipt this Period

63.49

Subtotal Of Receipts This Page (optional)..... **813.49**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANDREW TACHINKEL

Mailing Address **4 HILLSIDE PLACE**

City **CHAPPAQUA** State **NY** Zip Code **10514**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW YORK BOTANICAL GARDEN** Occupation **DIGITAL IMAGING TECHNICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.133002

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN AND ERLANE TAIT

Mailing Address **13839 SILKVINE LANE**

City **JACKSONVILLE** State **FL** Zip Code **32224**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.133068

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOHN TAKACS

Mailing Address **3628 SE TENINO ST**

City **PORTLAND** State **OR** Zip Code **97202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.133076

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1000.00**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN TAKACS

Mailing Address **3628 SE TENINO ST**

City **PORTLAND** State **OR** Zip Code **97202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **281.67**

Transaction ID : SA17A.133077

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
31.67

B. Full Name (Last, First, Middle Initial)
JENNIFER TALBOTT

Mailing Address **107 LAGUNA STREET**

City **SANTA CRUZ** State **CA** Zip Code **95060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **206.77**

Transaction ID : SA17A.133120

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM M TALMADGE

Mailing Address **215 TALMADGE RD.**

City **HAMPTON** State **GA** Zip Code **30228**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCGUIRE WOODS** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **265.11**

Transaction ID : SA17A.133162

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period
265.11

Subtotal Of Receipts This Page (optional)..... **396.78**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DINO TAMAYO

Mailing Address **6013RD AVENUE**

City State Zip Code
ENPT NE 11731

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 ▼
240.00

Transaction ID : SA17A.133192

Date of Receipt

09 / 18 / 2015

Amount of Each Receipt this Period

40.00

B. Full Name (Last, First, Middle Initial)
MARK TAMSEN

Mailing Address **PO BOX 370630**

City State Zip Code
SAN DIEGO CA 92137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMERGENCY CARE DYNAMICS ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.133230

Date of Receipt

09 / 19 / 2015

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
MARK TAMSEN

Mailing Address **PO BOX 370630**

City State Zip Code
SAN DIEGO CA 92137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMERGENCY CARE DYNAMICS ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17A.133231

Date of Receipt

09 / 24 / 2015

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional)..... **5440.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TIM TANTON

Mailing Address 521 CR 1154

City	State	Zip Code
BRASHEAR	TX	75420

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.133321

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

<input type="text" value="172.37"/>

B. Full Name (Last, First, Middle Initial)
JOHN TARNOK

Mailing Address 711 OLD BETHPAGE ROAD

City	State	Zip Code
OLD BETHPAGE	NY	11804

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FLASH CARGO, INC.	INFORMATION TECHNOLOGY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.133409

Date of Receipt

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
MICHELLE TATUM

Mailing Address 13131 SUNRISE TRAIL PLACE NE

City	State	Zip Code
ALBUQUERQUE	NM	87111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.133520

Date of Receipt

M M / D D / Y Y Y Y
08 / 22 / 2015

Amount of Each Receipt this Period

<input type="text" value="248.23"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ADRIENNE TAYLOR

Mailing Address 444 EAST 82ND ST. APT 33B

City State Zip Code
NEW YORK NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AIG DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.133577

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
EILEEN TAYLOR

Mailing Address 674 RIVER RD

City State Zip Code
NEWBURGH NY 12550

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 ▼
209.69

Transaction ID : SA17A.133651

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
209.69

C. Full Name (Last, First, Middle Initial)
LARRY TAYLOR

Mailing Address 421 CREST DRIVE

City State Zip Code
BIRMINGHAM AL 35209

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 ▼
560.27

Transaction ID : SA17A.133742

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
60.27

Subtotal Of Receipts This Page (optional).....▶ 519.96

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM TAYLOR

Mailing Address 7102 PEYTON LANE

City	State	Zip Code
MARION	IL	62959

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
IDOC	CORRECTIONAL SERGEANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.133854

Date of Receipt

M M / D D / Y Y Y Y
08 / 21 / 2015

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
KENNETH TENNEY

Mailing Address 104 NE HUNTER ST.

City	State	Zip Code
MICANOPY	FL	32667

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CENTRAL FLORIDA DRYWALL & PLASTERING	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.134062

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period

_____ 250.00

C. Full Name (Last, First, Middle Initial)
ANTHONY TEPLITZ

Mailing Address 12 WORTHINGTON CT.

City	State	Zip Code
WEST NYACK	NY	10994

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TEPLITZ METAL PROCESSING	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.134096

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2015

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 750.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PATRICK H TERRY

Mailing Address **4 ELLINGTON DR**

City State Zip Code
COLUMBUS NJ 08022

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 : SA17A.134200

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROLAND TERRY

Mailing Address **PO BOX 8192**

City State Zip Code
MERIDIAN MS 39303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONSTRUCTION SERVICES, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.134208

Date of Receipt
M M / D D / Y Y Y Y
08 20 2015

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RICHARD THALHEIMER

Mailing Address **2301 KERNER BLVD #C**

City State Zip Code
SAN RAFAEL CA 94901

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 : SA17A.134329

Date of Receipt
M M / D D / Y Y Y Y
08 19 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VIRGINIA THIGPEN

Mailing Address P.O. BOX 2385

City State Zip Code
DACULA GA 30019

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 : SA17A.134481

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ARTHUR THOMAS

Mailing Address 5313 PINE FOREST

City State Zip Code
HOUSTON TX 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ABRAHAM THOMAS MDPA PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.134517

Date of Receipt

M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
DEE THOMAS

Mailing Address 1963 S BRITTANY PL

City State Zip Code
SPRINGFIELD MO 65809

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 ▼
207.63

Transaction ID : SA17A.134572

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

107.63

Subtotal Of Receipts This Page (optional).....▶ 857.63

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JON THOMAS

Mailing Address 19601 VAN AKEN BLVD.
APT 29

City SHAKER /HEIGHTS State OH Zip Code 44122

FEC ID number of contributing federal political committee. **C**

Name of Employer CEE JAY CONSULTANTS, LTD. Occupation CONSTRUCTION MANAGEMENT SERVICES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.134632

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			01			2015			

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
DARLA THOMPSON

Mailing Address 3904 IDALIA DR

City AUSTIN State TX Zip Code 78749

FEC ID number of contributing federal political committee. **C**

Name of Employer DT CLAIMS Occupation ROOF INSPECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
343.90

Transaction ID : SA17A.134857

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			13			2015			

Amount of Each Receipt this Period

343.90

C. Full Name (Last, First, Middle Initial)
JOHN THOMPSON

Mailing Address 330 FRANKLIN RD # 135A-115

City BRENTWOOD State TN Zip Code 37027

FEC ID number of contributing federal political committee. **C**

Name of Employer TRINITY HEALTHCARE Occupation HEALTHCARE CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.134934

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶

843.90

Total This Period (last page this line number only).....▶

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVE THOMPSON

Mailing Address 528 N WHITE AVE

City State Zip Code
KANSAS CITY MO 64123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NATIONS HOLDING COMPANY WEB DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.135046

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
LUKE THORBURN

Mailing Address 116 JOHN STREET
APT 2307

City State Zip Code
NEW YORK NY 10038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GOLDMAN SACHS INVESTMENT MAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
267.29

Transaction ID : SA17A.135101

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period

267.29

C. Full Name (Last, First, Middle Initial)
LUKE THORBURN

Mailing Address 116 JOHN STREET
APT 2307

City State Zip Code
NEW YORK NY 10038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GOLDMAN SACHS INVESTMENT MAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
534.58

Transaction ID : SA17A.135102

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period

534.58

Subtotal Of Receipts This Page (optional).....▶ 784.58

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN THORNE

Mailing Address 21941 YBARRA RD

City State Zip Code
WOODLAND HILLS CA 91364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF COMPUTER ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
228.95

Transaction ID : SA17A.135132

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
128.95

B. Full Name (Last, First, Middle Initial)
DARRYL THORNTON

Mailing Address 229 LILAC DR

City State Zip Code
LAFOLLETTE TN 37766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOME FEDERAL BANK REAL ESTATE APPRAISER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
202.40

Transaction ID : SA17A.135152

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
86.98

C. Full Name (Last, First, Middle Initial)
NEELIMA THOTA

Mailing Address 2445 CIMMARON DRIVE

City State Zip Code
PLANO TX 75025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FEDEX ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.135209

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 715.93

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SAMUEL TIBBS

Mailing Address 2026 SOUTH 18TH STREET

City TACOMA State WA Zip Code 98405

FEC ID number of contributing federal political committee.

Name of Employer TRUCK DRIVER Occupation US POSTAL SERVICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.135297

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GREGORY TIGANI

Mailing Address 1021 SHERRINGHAM WAY

City WAXHAW State NC Zip Code 28173

FEC ID number of contributing federal political committee.

Name of Employer NORTHWEST COMPANIES Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.135390

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL TILL

Mailing Address 71 N GARY GLEN CIR

City THE WOODLANDS State TX Zip Code 77382

FEC ID number of contributing federal political committee.

Name of Employer PCS SOFTWARE, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.135415

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PAOLO TIRAMANI

Mailing Address 500 GROUP INC
500 WEST PUTNAM AVE

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
500 GROUP INC C.E.O.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.135573

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
VERNOR TOLAND

Mailing Address 4138 VERSAILLES DRIVE
UNIT D

City State Zip Code
ORLANDO FL 32808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DIAMOND RESORTS INTERNATIONAL SALES & MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.135766

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
SHAUN TOLBERT

Mailing Address 201 TY LANE

City State Zip Code
WARRIOR AL 35180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JEFFERSON COUNTY PSYCHIATRIC NURSE PRACTITIONER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
217.09

Transaction ID : SA17A.135776

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 2850.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL TOMAMICHEL			Transaction ID : SA17A.135813																						
Mailing Address 631 N. STEPHANIE ST. #498			Date of Receipt																						
City HENDERSON State NV Zip Code 89014			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>12</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			12			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			12			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer RETIRED		Occupation RETIRED	<table border="1"> <tr> <td colspan="10" style="text-align: right;">24.93</td> </tr> </table>			24.93																			
24.93																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"> <tr> <td colspan="10" style="text-align: right;">224.93</td> </tr> </table>			224.93																			
224.93																									

B. Full Name (Last, First, Middle Initial) MICHAEL TOMAMICHEL			Transaction ID : SA17A.135814																						
Mailing Address 631 N. STEPHANIE ST. #498			Date of Receipt																						
City HENDERSON State NV Zip Code 89014			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>18</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	09			18			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			18			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer RETIRED		Occupation RETIRED	<table border="1"> <tr> <td colspan="10" style="text-align: right;">25.00</td> </tr> </table>			25.00																			
25.00																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"> <tr> <td colspan="10" style="text-align: right;">249.93</td> </tr> </table>			249.93																			
249.93																									

C. Full Name (Last, First, Middle Initial) JOHN TOMPKINS			Transaction ID : SA17A.135902																						
Mailing Address 211 HWY 38E			Date of Receipt																						
City ROCHELLE State IL Zip Code 61068			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>01</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	08			01			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			01			2015																			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer NEWS MEDIA CORPORATION		Occupation OWNER PRESIDENT OF A NEWSPAPER	<table border="1"> <tr> <td colspan="10" style="text-align: right;">1000.00</td> </tr> </table>			1000.00																			
1000.00																									
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"> <tr> <td colspan="10" style="text-align: right;">1000.00</td> </tr> </table>			1000.00																			
1000.00																									

Subtotal Of Receipts This Page (optional).....▶

1049.93									
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Total This Period (last page this line number only).....▶

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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARILYN TONG

Mailing Address 1134 N. SYCAMORE AVENUE
#309

City State Zip Code
LOS ANGELES CA 90038

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 ▼
207.10

Transaction ID : SA17A.135957

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			22			2015			

Amount of Each Receipt this Period

57.10

B. Full Name (Last, First, Middle Initial)
MARILYN TONG

Mailing Address 1134 N. SYCAMORE AVENUE
#309

City State Zip Code
LOS ANGELES CA 90038

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 ▼
257.10

Transaction ID : SA17A.135958

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
MARILYN TONG

Mailing Address 1134 N. SYCAMORE AVENUE
#309

City State Zip Code
LOS ANGELES CA 90038

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 ▼
288.77

Transaction ID : SA17A.135959

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

31.67

Subtotal Of Receipts This Page (optional).....▶ **138.77**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHAWN TOOPS

Mailing Address 3606 GOODNIGHT TRAIL

City State Zip Code
LEANDER TX 78641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLAME TECHNOLOGIES, INC. MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.136004

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL TOUCHETTE

Mailing Address 7 RAMSDELL WAY

City State Zip Code
LYNNFIELD MA 01940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MICHAEL TOUCHETTE CONTRACTORS CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.136181

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
JOHN TREANOR

Mailing Address 251 GRAYS ROAD

City State Zip Code
HARWOOD MD 20776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PIPETTES UNLIMITED OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.25

Transaction ID : SA17A.136524

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
73.42

Subtotal Of Receipts This Page (optional).....▶ 623.42

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) JOHN TREANOR		Transaction ID : SA17A.136525	
Mailing Address 251 GRAYS ROAD		Date of Receipt MM / DD / YYYY 08 / 23 / 2015	
City HARWOOD	State MD	Zip Code 20776	
FEC ID number of contributing federal political committee.	C		
Name of Employer PIPETTES UNLIMITED	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 302.07		
		Amount of Each Receipt this Period 36.82	

B. Full Name (Last, First, Middle Initial) JOHN TREANOR		Transaction ID : SA17A.136526	
Mailing Address 251 GRAYS ROAD		Date of Receipt MM / DD / YYYY 09 / 13 / 2015	
City HARWOOD	State MD	Zip Code 20776	
FEC ID number of contributing federal political committee.	C		
Name of Employer PIPETTES UNLIMITED	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 369.17		
		Amount of Each Receipt this Period 67.10	

C. Full Name (Last, First, Middle Initial) JOHN TREANOR		Transaction ID : SA17A.136527	
Mailing Address 251 GRAYS ROAD		Date of Receipt MM / DD / YYYY 09 / 26 / 2015	
City HARWOOD	State MD	Zip Code 20776	
FEC ID number of contributing federal political committee.	C		
Name of Employer PIPETTES UNLIMITED	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 468.73		
		Amount of Each Receipt this Period 99.56	

Subtotal Of Receipts This Page (optional)..... **203.48**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK TREEN

Mailing Address 609 SHERIDAN

City State Zip Code
CORPUS CHRISTI TX 78412

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STREEM COMPANY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.136545

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
STEVE TREMMEL

Mailing Address 8405 HORSE MOUNTAIN COVE

City State Zip Code
AUSTIN TX 78759

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STEVE TREMMEL SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.136579

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CLEMENT TREMPÉ MD

Mailing Address 218 WILSON ROAD

City State Zip Code
NAHANT MA 01908

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CLEMENT TREMPÉ MD MD

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.136583

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JERRY TRENT

Mailing Address 1501 WEST COLORADO AVE

City State Zip Code
COLORADO SPRINGS CO 80904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JERRY TRENT RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.136595

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
ROBERT TRESTON

Mailing Address 731 BOULEVARD EAST

City State Zip Code
WEEHAWKEN NJ 07086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MSA SECURITY SMART TECH ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
340.90

Transaction ID : SA17A.136624

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
340.90

C. Full Name (Last, First, Middle Initial)
DAN TRUMAN

Mailing Address 6335 JAPATUL HIGHLANDS ROAD

City State Zip Code
ALPINE CA 91901

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 ▼
222.78

Transaction ID : SA17A.136941

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
222.78

Subtotal Of Receipts This Page (optional).....▶ 613.68

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID TRUMP

Mailing Address 3510 RYOAK

City	State	Zip Code
SAN ANTONIO	TX	78217

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SEISEISCO INTERNATIONAL	PRESIDENT CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.136955

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
EDMUND TUBEL

Mailing Address 13225 PROVIDENCE GREEN CT

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TRICOR, INC.	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137046

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAMES TULLIS

Mailing Address 420 ORANGE BLUFF AVE

City	State	Zip Code
JACKSONVILLE	FL	32211

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JAMES F TULLIS & ASSOC.	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137210

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			02			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HURLEY TURNER

Mailing Address 30 BURTON HILLS SUITE 575

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CTFF	ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137410

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	1	5

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ROBERT TURNER

Mailing Address 101 EAST BROAD ST

City	State	Zip Code
MURFREESBORO	NC	27855

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
WM F MILLER AND ASSOCIATES	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137458

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ROBERT TURNER

Mailing Address PO BOX 153

City	State	Zip Code
HOTCHKISS	CO	81419

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MOUNTAIN COAL COMPANY	MINER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137456

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	9	/	2	0	1	5

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<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

PAGE 671 / 1212

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JEANNE L TURNOCK

Mailing Address **3321 OFFUTT ROAD**

City **RANDALLSTOWN** State **MD** Zip Code **21133**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TURNOCK REAL ESTATE SERVICES, INC.** Occupation **REAL ESTATE BROKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Transaction ID : SA17A.137483

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
TONYA TURPIN

Mailing Address **2826 CUMBERLAND AVENUE**

City **MIDDLESBORO** State **KY** Zip Code **40966**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARH** Occupation **NURSE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **260.55**

Transaction ID : SA17A.137500

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
260.55

C. Full Name (Last, First, Middle Initial)
DAWN TUTHILL

Mailing Address **500 BROADWAY**

City **WESTVILLE** State **NJ** Zip Code **08093**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KAPLAN & ZUBRIN** Occupation **ACCOUNT MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **223.28**

Transaction ID : SA17A.137521

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **610.55**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANN MARIE TUZZOLINO

Mailing Address 16 MIRIAM STREET

City VALLEY STREAM State NY Zip Code 11581

FEC ID number of contributing federal political committee.

Name of Employer LONG BEACH CITY SCHOOL DISTRICT Occupation TEACHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137559

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
THOMAS J. TYLER

Mailing Address 212 BAY SHORE DR

City BELMONT State NC Zip Code 28012

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137639

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			16			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL TYNING

Mailing Address 80 MANDERLY ROAD

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee.

Name of Employer DIAL GENERAL ENGINEERING Occupation GOVERNMENT CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.137655

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JAMES D UHLINGER JR

Mailing Address PO BOX 653

City State Zip Code
CARTHAGE NY 13619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHAMPION MATERIALS MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.59

Transaction ID : SA17A.137727

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
235.59

B. Full Name (Last, First, Middle Initial)
JAMES UHLINGER III

Mailing Address 502 S. WASHINGTON ST

City State Zip Code
CARTHAGE NY 13619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHAMPION MATERIALS MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.69

Transaction ID : SA17A.137729

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
209.69

C. Full Name (Last, First, Middle Initial)
JAMES UHLINGER III

Mailing Address 502 S. WASHINGTON ST

City State Zip Code
CARTHAGE NY 13619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHAMPION MATERIALS MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.18

Transaction ID : SA17A.137730

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
63.49

Subtotal Of Receipts This Page (optional).....▶ 508.77

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

JASON UHRIN

Transaction ID : SA17A.137735

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Mailing Address 1825 GALINDO STREET
317

City State Zip Code
CONCORD CA 94520

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ARKSHIRE FINANCIAL PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)

CLINT URSO

Transaction ID : SA17A.137975

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			15			2015			

Mailing Address 2029 CENTURY PARK EAST SUITE 400

City State Zip Code
LOS ANGELES CA 90067

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

CLINT URSO

Transaction ID : SA17A.137976

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Mailing Address 2029 CENTURY PARK EAST SUITE 400

City State Zip Code
LOS ANGELES CA 90067

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

CLINT URSO

Mailing Address 2029 CENTURY PARK EAST SUITE 400

City	State	Zip Code
LOS ANGELES	CA	90067

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1174.35

Transaction ID : SA17A.137977

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period

174.35

B. Full Name (Last, First, Middle Initial)

CLINT URSO

Mailing Address 2029 CENTURY PARK EAST SUITE 400

City	State	Zip Code
LOS ANGELES	CA	90067

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1674.35

Transaction ID : SA17A.137978

Date of Receipt

M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

GENE V

Mailing Address 1500 BRINKER ROAD
PO 31

City	State	Zip Code
WELLSBURG	WV	26070

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FINANCIAL WEST GROUP	SECURITIES DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.138040

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....▶ 1674.35

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RANDALL VAIL

Mailing Address **3421 NOGALITOS**

City State Zip Code
SAN ANTONIO TX 78225-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.138090

Date of Receipt
M M / D D / Y Y Y Y
07 11 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT VALDEZ

Mailing Address **20 WAKELAND COURT**

City State Zip Code
FRONT ROYAL VA 22630

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 : SA17A.138139

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GENE VALENTINE

Mailing Address **12925 NORTHWEST FREEWA
150**

City State Zip Code
HOUSTON TX 77040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FINANCIAL WEST GROUP SECURITIES DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.138169

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HAROLD VAN ALLEN

Mailing Address 351 NORTH ROAD

City State Zip Code
HURLEY NY 12443

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 ▼
350.00

Transaction ID : SA17A.138281

Date of Receipt
M M / D D / Y Y Y Y
08 / 30 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMISON VANCE

Mailing Address 212 MAPLE TREE DR

City State Zip Code
BRISTOL TN 37620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FARMERS INSURANCE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.138527

Date of Receipt
M M / D D / Y Y Y Y
07 / 04 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN VAN DAM

Mailing Address 1652 EAST 88TH STREET

City State Zip Code
NEWAYGO MI 49337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GELOCK TRANSFER LINE ESTIMATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.138303

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PETER H VAN DER LINDE

Mailing Address 2820 HYDRAULIC RD STE 2

City	State	Zip Code
CHARLOTTESVILLE	VA	22901

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.138310

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
L. KENT VAN METER

Mailing Address PO BOX 4351

City	State	Zip Code
KINGSHILL	VI	00851

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.138394

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DAVID VAN TASSEL

Mailing Address 1045 FIFTH AVENUE
6

City	State	Zip Code
NEW YORK	NY	10028

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VTMI INC.	REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.138445

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 679 / 1212

(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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

WALTER VAN VLECK SR

Mailing Address **BOX 877**

City **WILLISTON** State **FL** Zip Code **32696**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **238.41**

Transaction ID : SA17A.138461

Date of Receipt

09 / **08** / **2015**

Amount of Each Receipt this Period

_____ **138.41**

B. Full Name (Last, First, Middle Initial)

VISHNU VARMA

Mailing Address **9 WEST 57TH ST
35TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10019**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TIGER GLOBAL** Occupation **CTO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **272.12**

Transaction ID : SA17A.138801

Date of Receipt

09 / **01** / **2015**

Amount of Each Receipt this Period

_____ **272.12**

C. Full Name (Last, First, Middle Initial)

JOHN VASSALLO

Mailing Address **9499 CARRINGTON DRIVE**

City **MYRTLE BEACH** State **SC** Zip Code **29579**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ **252.11**

Transaction ID : SA17A.138880

Date of Receipt

08 / **19** / **2015**

Amount of Each Receipt this Period

_____ **75.00**

Subtotal Of Receipts This Page (optional)..... **485.53**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN VASSALLO

Mailing Address 9499 CARRINGTON DRIVE

City MYRTLE BEACH State SC Zip Code 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
268.57

Transaction ID : SA17A.138881

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
16.46

B. Full Name (Last, First, Middle Initial)
JOHN VASSALLO

Mailing Address 9499 CARRINGTON DRIVE

City MYRTLE BEACH State SC Zip Code 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
368.57

Transaction ID : SA17A.138882

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN VASSALLO

Mailing Address 9499 CARRINGTON DRIVE

City MYRTLE BEACH State SC Zip Code 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.24

Transaction ID : SA17A.138883

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
31.67

Subtotal Of Receipts This Page (optional).....▶ 148.13

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JENNIFER VATARU

Mailing Address **PO BOX 475575**

City State Zip Code
SAN FRANCISCO CA 94147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
241.15

Transaction ID : SA17A.138906

Date of Receipt
M M / D D / Y Y Y Y
09 12 2015

Amount of Each Receipt this Period
90.04

B. Full Name (Last, First, Middle Initial)
JUNE VEAZEY

Mailing Address **2355 OLD OCILLA ROAD**

City State Zip Code
TIFTON GA 31794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PATTY S VEAZEY LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
228.69

Transaction ID : SA17A.139045

Date of Receipt
M M / D D / Y Y Y Y
08 20 2015

Amount of Each Receipt this Period
128.69

C. Full Name (Last, First, Middle Initial)
JAMES VEIGLE

Mailing Address **1301 W FAIRBANKS AVE**

City State Zip Code
WINTER PARK FL 32789

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.139087

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1218.73**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOE VELLUCCI

Mailing Address 141 SPYGLASS DR

City	State	Zip Code
BLUE BELL	PA	19422

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MEDTRONIC	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.139136

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JACQUELINE VERDEROSA

Mailing Address 75 ADLERS LANE

City	State	Zip Code
STATEN ISLAND	NY	10307

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.139248

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ZACHARY VERLEE

Mailing Address 275 WEST HAZELWOOD AVE

City	State	Zip Code
RAHWAY	NJ	07065

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
L'OREAL	SR MANAGER TECHNICAL PACKAGING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.139284

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VICTORIA VERNON

Mailing Address **3896 RIVERSIDE DRIVE
APT. 3897**

City **MACON** State **GA** Zip Code **31210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SER** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.28

Transaction ID : SA17A.139321

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period
102.05

B. Full Name (Last, First, Middle Initial)
ERNEST VESCE

Mailing Address **P.O. BOX 674**

City **MT. KISCO** State **NY** Zip Code **10549**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.139353

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL VICKERS

Mailing Address **P O BOX 591912**

City **HOUSTON** State **TX** Zip Code **77259**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.139442

Date of Receipt
M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ **3302.05**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
TOM VIDRINE

Mailing Address **2845 INDIAN HILLS ROAD**

City State Zip Code
VILLE PLATTE LA 70586

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 ▼
2700.00

Transaction ID : SA17A.139493

Date of Receipt
M M / D D / Y Y Y Y
08 26 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
ANTONIA VIENS

Mailing Address **801 DICKINSON ROAD**

City State Zip Code
INDEPENDENCE MO 64050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.139511

Date of Receipt
M M / D D / Y Y Y Y
07 10 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ANTONIA VIENS

Mailing Address **801 DICKINSON ROAD**

City State Zip Code
INDEPENDENCE MO 64050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.139512

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **2900.00**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 685 / 1212
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b
<input type="checkbox"/> 18	<input type="checkbox"/> 21	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ANTONIA VIENS			Transaction ID : SA17A.139513																						
Mailing Address 801 DICKINSON ROAD			Date of Receipt																						
City INDEPENDENCE		State MO	Zip Code 64050	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>07</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			07			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
08			07			2015																			
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period																						
C <input type="text"/>			<input type="text"/> 100.00																						
Name of Employer SELF EMPLOYED		Occupation REAL ESTATE CONSULTANT																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 500.00																							

B. Full Name (Last, First, Middle Initial) JEFFREY VIENS			Transaction ID : SA17A.139516																						
Mailing Address 132 ROUTE 66			Date of Receipt																						
City COLUMBIA		State CT	Zip Code 06237	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>15</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			15			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
09			15			2015																			
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period																						
C <input type="text"/>			<input type="text"/> 100.00																						
Name of Employer SELF EMPLOYED		Occupation PROPERTY MANAGEMENT																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 221.87																							

C. Full Name (Last, First, Middle Initial) SCOTT VIGUE			Transaction ID : SA17A.139553																						
Mailing Address 2781 EAST VINA DEL MAR BLVD			Date of Receipt																						
City ST PETE BEACH		State FL	Zip Code 33706	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>07</td><td></td><td></td><td>29</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	07			29			2015			
M	M	/	D	D	/	Y	Y	Y	Y																
07			29			2015																			
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period																						
C <input type="text"/>			<input type="text"/> 1000.00																						
Name of Employer ONE HOUR AC		Occupation CONTRACTOR																							
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 1000.00																							

Subtotal Of Receipts This Page (optional).....	<input type="text"/> 1200.00
Total This Period (last page this line number only).....	<input type="text"/>

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT VIGUE

Mailing Address 2781 EAST VINA DEL MAR BLVD

City State Zip Code
ST PETE BEACH FL 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ONE HOUR AC CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.139554

Date of Receipt

/ /

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
SCOTT VIGUE

Mailing Address 2781 EAST VINA DEL MAR BLVD

City State Zip Code
ST PETE BEACH FL 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ONE HOUR AC CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Transaction ID : SA17A.139555

Date of Receipt

/ /

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
SCOTT VIGUE

Mailing Address 2781 EAST VINA DEL MAR BLVD

City State Zip Code
ST PETE BEACH FL 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ONE HOUR AC CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.150432

Date of Receipt

/ /

Redesignate: REDESIGNATED TO GENERAL 2016

Amount of Each Receipt this Period

-300.00

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... **2000.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT VIGUE

Mailing Address 2781 EAST VINA DEL MAR BLVD

City State Zip Code
ST PETE BEACH FL 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ONE HOUR AC CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.150433

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Redesignate: REDESIGNATED FROM PRIMARY 2016

Amount of Each Receipt this Period
300.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
AMANDA VINCENT

Mailing Address 6232 WINDRUSH HOLLOW

City State Zip Code
BATON ROUGE LA 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROY O MARTIN MARKETING AND SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
202.76

Transaction ID : SA17A.139625

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
202.76

C. Full Name (Last, First, Middle Initial)
W. SCOTT VINCENT

Mailing Address 5613 GREEN APPLE LANE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VINCENT AND ASSOCIATES CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.139653

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 302.76

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
W. SCOTT VINCENT

Mailing Address 5613 GREEN APPLE LANE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VINCENT AND ASSOCIATES CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.139654

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
LARRY VINT

Mailing Address 3206 N COLORADO AVE
COLORADO

City State Zip Code
LOVELAND CO 80538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.139693

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DAN VINYARD

Mailing Address 5517 BAYLOR DR.

City State Zip Code
BARTLESVILLE OK 74006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAL-MART SECURITY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
207.90

Transaction ID : SA17A.139696

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MR. JAMES A VIVELO

Mailing Address 41 ORCHARD

City State Zip Code
EDISON NJ 08837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
METUCHEN/EDISON TAXI OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
317.40

Transaction ID : SA17A.139830

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
THOMAS VOGT

Mailing Address 2518 RADCLIFFE

City State Zip Code
SUGAR LAND TX 77498

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VOGT AIR COND. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.139910

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
VINCENT VOLPE

Mailing Address 25146 CRANES ROOST CIRCLE

City State Zip Code
LEESBURG FL 34748

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 : SA17A.139981

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) BRAD/JUDY/KRIS VON SYDOW			Transaction ID : SA17A.140023		
Mailing Address 52 N BRIDGEVIEW STREET			Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2015		
City PALATINE	State IL	Zip Code 60067	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period _____ 300.00		
Name of Employer VON SYDOW'S MOVING AND STORAGE, INC		Occupation BUSINESS OWNER	Amount of Each Receipt this Period _____ 300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00	Amount of Each Receipt this Period _____ 300.00		

B. Full Name (Last, First, Middle Initial) CINDY VOYLES			Transaction ID : SA17A.140103		
Mailing Address 4708 POLO LANE SE			Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2015		
City ATLANTA	State GA	Zip Code 30339	Amount of Each Receipt this Period _____ 2700.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period _____ 2700.00		
Name of Employer ED VOYLES AUTOMOTIVE GROUP		Occupation OWNER	Amount of Each Receipt this Period _____ 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2700.00	Amount of Each Receipt this Period _____ 2700.00		

C. Full Name (Last, First, Middle Initial) ALBINA VURRO			Transaction ID : SA17A.140163		
Mailing Address 200 E. 72 ST. 35 B			Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2015		
City NEW YORK	State NY	Zip Code 10021	Amount of Each Receipt this Period _____ 145.49		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period _____ 145.49		
Name of Employer MOTHER NATURE'S GARDEN		Occupation CONSULTANT	Amount of Each Receipt this Period _____ 145.49		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 245.49	Amount of Each Receipt this Period _____ 145.49		

Subtotal Of Receipts This Page (optional).....▶ **3145.49**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALBINA VURRO

Mailing Address **200 E. 72 ST.**
35 B

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MOTHER NATURE'S GARDEN** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
283.52

Transaction ID : SA17A.140164

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period
38.03

B. Full Name (Last, First, Middle Initial)
ALBINA VURRO

Mailing Address **200 E. 72 ST.**
35 B

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MOTHER NATURE'S GARDEN** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
377.74

Transaction ID : SA17A.140165

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
94.22

C. Full Name (Last, First, Middle Initial)
ALBINA VURRO

Mailing Address **200 E. 72 ST.**
35 B

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MOTHER NATURE'S GARDEN** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
387.74

Transaction ID : SA17A.140166

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period
10.00

Subtotal Of Receipts This Page (optional).....▶ **142.25**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ALBINA VURRO

Mailing Address 200 E. 72 ST.
35 B

City State Zip Code
NEW YORK NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MOTHER NATURE'S GARDEN CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
427.74

Transaction ID : SA17A.140167

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
EDDIE WACHS

Mailing Address 801 ASBURY DR

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WTS CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.140201

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JEFF WADDELL

Mailing Address 2020 ABERDEEN COURT

City State Zip Code
SYCAMORE IL 60178

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 : SA17A.140235

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 790.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 693 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAM WADMAN

Mailing Address 1825 KNOB RD

City MARYVILLE State TN Zip Code 37803

FEC ID number of contributing federal political committee. **C**

Name of Employer SYNERGETICS Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.140298

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DR. JEANNE WAGNER

Mailing Address 95 BLUESTEM DR

City SANTA FE State NM Zip Code 87506-9509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.140360

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JASON WAGNER

Mailing Address PO BOX 1712

City ROYAL OAK State MI Zip Code 48068

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation CARPENTER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
216.63

Transaction ID : SA17A.140379

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... 700.00

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK WALBRIDGE

Mailing Address **PO BOX 67049**

City State Zip Code
PORTLAND OR 97268

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 : SA17A.140523

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
RICHARD WALDEN

Mailing Address **2800 WINDOVER CV**

City State Zip Code
JONESBORO AR 72401

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 ▼
500.00

Transaction ID : SA17A.140548

Date of Receipt

07 / 08 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
STEPHEN WALDEN

Mailing Address **2495 GINNY WAY**

City State Zip Code
LAFAYETTE CO 80026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RISK MANAGEMENT SOLUTIONS SVP SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.140552

Date of Receipt

08 / 23 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional)..... **1000.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
CHRIS WALDORF

Mailing Address 1407 BROADMOOR DR. E

City	State	Zip Code
SEATTLE	WA	98112

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CASCADE LEAN CONSULTING	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.140562

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	13	/	2015

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
JIM WALDRON

Mailing Address 5940 SILVER BIRCH ROAD

City	State	Zip Code
ORTONVILLE	MI	48462

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 ▼
 _____ 1000.00

Transaction ID : SA17A.140570

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	06	/	2015

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
HENRY WALKER

Mailing Address 519 MACKINTOSH DR

City	State	Zip Code
MAGNOLIA	TX	77354

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PRO FAB INC	SALESMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 364.56

Transaction ID : SA17A.140704

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	15	/	2015

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 2250.00

Total This Period (last page this line number only).....▶ _____

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MS. CHERYL A WALSH

Mailing Address 182 MT HOPE ST

City NORTH ATTLEBORO State MA Zip Code 02760

FEC ID number of contributing federal political committee.

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.141074

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
MR. JOHN G WALSH III

Mailing Address 82 NORTH AVE

City ATTLEBORO State MA Zip Code 02703

FEC ID number of contributing federal political committee.

Name of Employer Occupation
WALSH CONTRACTING CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.141109

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			24			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)
ROBERT WALSH

Mailing Address 5801 RIVER OAKS ROAD SOUTH

City HARAHAN State LA Zip Code 70123

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.141138

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			12			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
NATALIA WALSWORTH

Mailing Address 30 SAGE CREEK

City	State	Zip Code
IRVINE	CA	92603

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.141176

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			11			2015			

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
WILLIAM WALTER

Mailing Address 116 MARINE ST.

City	State	Zip Code
FARMINGDALE	NY	11735

FEC ID number of contributing federal political committee.

C

Name of Employer
MAIN MACHINE & TOOL CO.

Occupation
MACHINIST

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.141197

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
C. FOSTER WALTON JR

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO	FL	33062

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.149702

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			29			2015			

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶

3950.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KEVIN WARDROBE

Mailing Address **2 SERENITY LANE**

City	State	Zip Code
ANDOVER	MA	01810

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 ▼
1000.00

Transaction ID : SA17A.141484

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
NICHOLAS WARNOCK

Mailing Address **2921 SOUTH KERCKHOFF AVE**

City	State	Zip Code
SAN PEDRO	CA	90731

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WELLOGRAPH, INC	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.141584

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
ESTELLE WARREN

Mailing Address **P.O. BOX 561**

City	State	Zip Code
BEAVERTON	MI	48612

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 : SA17A.141621

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN WARREN

Mailing Address 127 PORTAFINO LANE

City State Zip Code
GEORGETOWN TX 78633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GILEAD SCIENCES, INC. NATIONAL ACCOUNT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.141639

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DON WASHKEWICZ

Mailing Address 7400 ROLLINGBROOK TRAIL

City State Zip Code
OLON OH 44139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARKER HANNIFIN CHAIR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.141735

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CECILY WATKINS

Mailing Address 17104 CABERNET COURT

City State Zip Code
CORNELIUS GA 30642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MANUFACTURER'S REPRESENTATIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
221.27

Transaction ID : SA17A.141862

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period
221.27

Subtotal Of Receipts This Page (optional).....▶ 971.27

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JONATHAN WATSON

Mailing Address **545 INDIAN CREEK TRAIL**

City **RUTLEDGE** State **GA** Zip Code **30663**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DTS** Occupation **SALES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.141978

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
TERRI WATSON

Mailing Address **1801 MELEAR ROAD**

City **BOWDON** State **GA** Zip Code **30108**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AUBREY SILVEY ENTERPRISES** Occupation **CONTROLLER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142016

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANDREA WATTERS

Mailing Address **4729 E. SUNRISE DRIVE
458**

City **TUCSON** State **AZ** Zip Code **85718**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WATTERS & WATTERS PLLC** Occupation **TRIAL ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.142046

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANDREA WATTERS

Mailing Address **4729 E. SUNRISE DRIVE**
458

City **TUCSON** State **AZ** Zip Code **85718**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WATTERS & WATTERS PLLC** Occupation **TRIAL ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
529.23

Transaction ID : SA17A.142047

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
29.23

B. Full Name (Last, First, Middle Initial)
JOYCE WATTERS

Mailing Address **4438 TROPICAL DR**

City **PANAMA CITY** State **FL** Zip Code **32404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DSI** Occupation **CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142052

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address **8324 NUNAH I TRAIL**

City **NASHVILLE** State **TN** Zip Code **37221**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142112

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **529.23**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address 8324 NUNAH Trail

City State Zip Code
NASHVILLE TN 37221

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 ▼
350.00

Transaction ID : SA17A.142113

Date of Receipt
MM / DD / YYYY
07 / 19 / 2015

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address 8324 NUNAH Trail

City State Zip Code
NASHVILLE TN 37221

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 ▼
450.00

Transaction ID : SA17A.142114

Date of Receipt
MM / DD / YYYY
08 / 06 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address 8324 NUNAH Trail

City State Zip Code
NASHVILLE TN 37221

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 ▼
550.00

Transaction ID : SA17A.142115

Date of Receipt
MM / DD / YYYY
08 / 07 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 300.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address 8324 NUNAH I TRAIL

City	State	Zip Code
NASHVILLE	TN	37221

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 ▼
 _____ 800.00

Transaction ID : SA17A.142116

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Amount of Each Receipt this Period

_____ 250.00

B. Full Name (Last, First, Middle Initial)
STEVEN WAY

Mailing Address 8324 NUNAH I TRAIL

City	State	Zip Code
NASHVILLE	TN	37221

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 ▼
 _____ 900.00

Transaction ID : SA17A.142117

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Amount of Each Receipt this Period

_____ 100.00

C. Full Name (Last, First, Middle Initial)
DAVID WEATHERBY

Mailing Address 2330 BAYSWATER CT.

City	State	Zip Code
ORLANDO	FL	32837

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PRODUCTION ELEKTRIKS	SPECIAL EVENT POWER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.142161

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

Amount of Each Receipt this Period

_____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 600.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MIKE WEATHERFORD

Mailing Address 1520 SPARKS,RD

City State Zip Code
PARIS TN 38242

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 : SA17A.142169

Date of Receipt

07 / 10 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
GARY WEAVER

Mailing Address 1426 LADY BIRD DRIVE

City State Zip Code
MCLEAN VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142201

Date of Receipt

08 / 09 / 2015

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
HOWARD WEAVER

Mailing Address 11186 ZACHARY DRIVE

City State Zip Code
MARION IL 62959

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 ▼
221.42

Transaction ID : SA17A.142207

Date of Receipt

08 / 14 / 2015

Amount of Each Receipt this Period

221.42

Subtotal Of Receipts This Page (optional)..... **721.42**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 705 / 1212

<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)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) SCOTT WEAVER		Transaction ID : SA17A.142231	
Mailing Address 4310 STOUT FIELD ND		Date of Receipt MM / DD / YYYY 08 / 04 / 2015	
City INDIANAPOLIS	State IN	Zip Code 46241	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SAW CAPITAL LLC	Occupation INVESTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) DOUGLAS WEBB		Transaction ID : SA17A.142263	
Mailing Address 15018 BLOSSOM BAY DR		Date of Receipt MM / DD / YYYY 08 / 29 / 2015	
City HOUSTON	State TX	Zip Code 77059	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation DOCTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) JOHN WEBB		Transaction ID : SA17A.142290	
Mailing Address 242 MCLEAN POINTE COURT		Date of Receipt MM / DD / YYYY 08 / 25 / 2015	
City WINTER HAVEN	State FL	Zip Code 33884	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.67	
Name of Employer WEBB'S REALTY	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 229.64		

Subtotal Of Receipts This Page (optional).....	1531.67
Total This Period (last page this line number only).....	

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
KENT WEBB

Mailing Address 1000 SW 44TH STREET
200

City State Zip Code
OKLAHOMA CITY OK 73109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KENT H. WEBB MD PLLC SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.142300

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROBERT W WEBBER

Mailing Address 68 BIRCH LANE

City State Zip Code
FOLSOM CA 95630

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 : SA17A.142359

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CLIFFORD WEBER

Mailing Address 2426 WISMER AVE.

City State Zip Code
ST. LOUIS MO 63114

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 : SA17A.142365

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SCOTT WEBER

Mailing Address **827 STONE CANYON CIR**

City **INVERNESS** State **IL** Zip Code **60010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **FINANCIAL ANALYST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
211.13

Transaction ID : SA17A.142421

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
83.06

B. Full Name (Last, First, Middle Initial)
GARRY WEBSTER

Mailing Address **450 E 131 WEST HWY**

City **WARDVILLE** State **OK** Zip Code **74576**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
232.17

Transaction ID : SA17A.142446

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2015

Amount of Each Receipt this Period
67.10

C. Full Name (Last, First, Middle Initial)
PAUL WEIDNER

Mailing Address **291 RIVER RD**

City **OAK HILL** State **FL** Zip Code **32759**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KIRBY TENT RENTAL** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142575

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **400.16**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROY WEILAND

Mailing Address **18 ROLLING HILL COURT**

City **MADISON** State **NJ** Zip Code **07940**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.142611

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JENNIFER WEISS

Mailing Address **411 S OLD WOODWARD AVE
#906**

City **BIRMINGHAM** State **MI** Zip Code **48009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DOMESTIC** Occupation **CRITIC**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.142762

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT WEISS

Mailing Address **8525 SW 2ND**

City **OKLAHOMA CITY** State **OK** Zip Code **73128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CARTS AND PARTS, INC.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.142773

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
RICK WEITEKAMP

Mailing Address 3150 SINGER AVE

City State Zip Code
SPRINGFIELD IL 62703

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.142801

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2015

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
REVA WELLER

Mailing Address 1747 CAMP SOUTH MOON RD

City State Zip Code
ASTOR FL 32102

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.142934

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MARTIE WELLS

Mailing Address 1228 CENTER DR.

City State Zip Code
COLTON CA 92324

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.143032

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARY LOU WELZ

Mailing Address **345 SPENCERPORT ROAD APT 111**

City	State	Zip Code
ROCHESTER	NY	14606

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 ▼

Transaction ID : SA17A.143124

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			27			2015			

Amount of Each Receipt this Period

<input type="text" value="101.12"/>

B. Full Name (Last, First, Middle Initial)
THOMAS WENTZLER

Mailing Address **28 AUTUMN CRESCENT**

City	State	Zip Code
THE WOODLANDS	TX	77381

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BINDER SCIENCE	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.143197

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			02			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
STEPHEN WERNER

Mailing Address **1150 FIESTA DRIVE**

City	State	Zip Code
GREENWOOD	IN	46143

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DELTA	VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.143260

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ERNIE WEST			Transaction ID : SA17A.143372		
Mailing Address 23403 HOLLY HOLLOW			Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2015		
City TOMBALL	State TX	Zip Code 77377	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C			Election Cycle-to-Date ▼ _____ 1000.00		
Name of Employer RETIRED		Occupation RETIRED	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) JIMMIE WEST			Transaction ID : SA17A.143384		
Mailing Address P.O. BOX 7			Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2015		
City COLMESNEIL	State TX	Zip Code 75938	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C			Election Cycle-to-Date ▼ _____ 250.00		
Name of Employer J.WEST CATTLE COMPANY		Occupation RANCHER	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) NORBERT WEST			Transaction ID : SA17A.143425		
Mailing Address 3160 ARROWHEAD DR			Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2015		
City GAINESVILLE	State GA	Zip Code 30506-1026	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C			Election Cycle-to-Date ▼ _____ 250.00		
Name of Employer RETIRED		Occupation RETIRED	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Subtotal Of Receipts This Page (optional).....▶ _____ **1500.00**

Total This Period (last page this line number only).....▶ _____

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) PAT WEST		Transaction ID : SA17A.143426
Mailing Address 4622 ROCKSPRINGS PLACE		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2015
City OCEANSIDE	State CA	Zip Code 92056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.12
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 224.12	

B. Full Name (Last, First, Middle Initial) ELLEN WETHERILL		Transaction ID : SA17A.143556
Mailing Address 116 GLENDALE ROAD		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2015
City EXTON	State PA	Zip Code 19341
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 203.99
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 309.92	

C. Full Name (Last, First, Middle Initial) ELLEN WETHERILL		Transaction ID : SA17A.143557
Mailing Address 116 GLENDALE ROAD		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2015
City EXTON	State PA	Zip Code 19341
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 127.97
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 437.89	

Subtotal Of Receipts This Page (optional).....▶ 456.08

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) MICHAEL WHALEN		Transaction ID : SA17A.143633	
Mailing Address 4306 YOAKUM STE 600		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2015	
City HOUSTON	State TX	Zip Code 77006	
FEC ID number of contributing federal political committee.		C	
Name of Employer WHALE CAPITAL	Occupation ENERGY TRADER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 261.95	
		Amount of Each Receipt this Period 261.95	

B. Full Name (Last, First, Middle Initial) KENNETH WHEELER		Transaction ID : SA17A.143706	
Mailing Address 952 BEAVERHEAD RD		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2015	
City VALIER	State MT	Zip Code 59486	
FEC ID number of contributing federal political committee.		C	
Name of Employer SELF-EMPLOYED	Occupation RANCHER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
		Amount of Each Receipt this Period 1000.00	

C. Full Name (Last, First, Middle Initial) BILLY WHITE		Transaction ID : SA17A.143849	
Mailing Address 21007 LAS LOMAS		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2015	
City SAN ANTONIO	State TX	Zip Code 78258	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00	
		Amount of Each Receipt this Period 2700.00	

Subtotal Of Receipts This Page (optional).....▶ 3961.95

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LINDA WHITE

Mailing Address 4433 MOCKINGBIRD LN.

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MAX ADDLRE	DERMATOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 209.69

Transaction ID : SA17A.144033

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

_____ 209.69

B. Full Name (Last, First, Middle Initial)
REBECCA WHITE

Mailing Address 332 WEST AJO WAY

City	State	Zip Code
TUCSON	AZ	85713

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
KAYDUB, LLC	ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 279.41

Transaction ID : SA17A.144094

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

_____ 125.61

C. Full Name (Last, First, Middle Initial)
STEVEN WHITE

Mailing Address 33 FLYING POINT RD
SUITE 127

City	State	Zip Code
SOUTHAMPTON	NY	11968

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
OCEAN BUILDING CORP	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17A.144126

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			27			2015			

Amount of Each Receipt this Period

_____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 835.30

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT WHITLEY

Mailing Address **5011 AVENUE B
NONE**

City State Zip Code
TORRANCE CA 90505

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 : SA17A.144255

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
GARY WHITTAKER

Mailing Address **746 RUSTIC LANE**

City State Zip Code
MOUNTAIN VIEW CA 94040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
1TALON LLC SEMICONDUCTORS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.144329

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PER WICKSTROM

Mailing Address **121 N.E. CAPITOL AVE**

City State Zip Code
BATTLOE CREEK MI 49017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A FOREVER RECOVERY CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.144442

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ **1500.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DAVID S WIGGINS

Mailing Address 2151 GULF SHORE BLVD. N.

City State Zip Code
NAPLES FL 34102

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 ▼
500.00

Transaction ID : SA17A.144579

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DEBBIE WIGGINS

Mailing Address 9901 RD 92
9971 US 26

City State Zip Code
BRIDGEPORT NE 69336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SERVICE STATION-GAS, OIL AND TIRES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.47

Transaction ID : SA17A.144581

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period
200.47

C. Full Name (Last, First, Middle Initial)
HENRY A WILKS

Mailing Address 195 SIDERIUS LANE

City State Zip Code
BIGFORK MT 59911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.144930

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 950.47

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
AUDREY WILL

Mailing Address 6189 MASSIVE PEAK CIRCLE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.144935

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
BRUCE WILLIAMS

Mailing Address PO BOX 357

City State Zip Code
ATHENS OH 45701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRAIN ON TIME OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
328.32

Transaction ID : SA17A.145062

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period

130.98

C. Full Name (Last, First, Middle Initial)
DAWN WILLIAMS

Mailing Address 9985 COLMANARA DRIVE

City State Zip Code
REMINDERVILLE OH 44202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NESTLE USA, INC. EXECUTIVE ASSISTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145119

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....▶ 480.98

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
GRANT WILLIAMS

Mailing Address **25 BANFI PLAZA NORTH**

City State Zip Code
FARMINGDALE NY 11735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHEASTERN OFFICE EQUIPMENT CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
238.63

Transaction ID : SA17A.145183

Date of Receipt
M M / D D / Y Y Y Y
08 13 2015

Amount of Each Receipt this Period
238.63

B. Full Name (Last, First, Middle Initial)
J TERRELL WILLIAMS

Mailing Address **4800 HWY 90 E**

City State Zip Code
LAKE CHARLES LA 70615

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 ▼
2700.00

Transaction ID : SA17A.145199

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
LOWELL WILLIAMS

Mailing Address **POB 1211**

City State Zip Code
HARRISON AR 72602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PEDIATRIC DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145297

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **3188.63**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MARK WILLIAMS

Mailing Address 26603 RIDGESTONE PARK LANE

City	State	Zip Code
CYPRESS	TX	77433

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
OCCIDENTAL OIL AND GAS	PETROLEUM ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145311

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
MONTE WILLIAMS

Mailing Address PO BOX 4040

City	State	Zip Code
WEST RICHLAND	WA	99353

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145335

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
THERESE WILLIAMS

Mailing Address PO BOX 6

City	State	Zip Code
BOYD	TX	76023

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BOYD ISD	PARA PROFESSIONAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145421

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ 750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS WILLIAMSON

Mailing Address 7218 MISTY MORNING DRIVE

City State Zip Code
HUMBLE TX 77346

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 : SA17A.145500

Date of Receipt
M M / D D / Y Y Y Y
07 / 05 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DEBRA WILSON

Mailing Address 8207 E EDEN CT

City State Zip Code
NAMPA ID 83687

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BREDA, INC. MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.145704

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GREGORY WILSON

Mailing Address 1408 SW 8TH ST

City State Zip Code
POMPANO BEACH FL 33069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRECISION METAL INDUSTRIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.145740

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1250.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JORDAN WILSON

Mailing Address **414 SE WASHINGTON BLVD.
PMB 138**

City **BARTLESVILLE** State **OK** Zip Code **74006**

FEC ID number of contributing federal political committee. **C**

Name of Employer **J.W. OIL LLC** Occupation **OIL AND GAS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
285.02

Transaction ID : SA17A.145785

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	5

Amount of Each Receipt this Period

94.00									
--------------	--	--	--	--	--	--	--	--	--

B. Full Name (Last, First, Middle Initial)
NEIL WILSON

Mailing Address **14951 HAHN LN**

City **SHAKOPEE** State **MN** Zip Code **55379**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EPASSING** Occupation **FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.145843

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

1000.00									
----------------	--	--	--	--	--	--	--	--	--

C. Full Name (Last, First, Middle Initial)
STEPHEN WILSON

Mailing Address **2485 GRASSY SPRING PL.**

City **LAS VEGAS** State **NV** Zip Code **89135**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RACING OPTICS** Occupation **ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.145922

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

1000.00									
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Subtotal Of Receipts This Page (optional).....▶ **2094.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD WILT

Mailing Address **19 BOUTWELL HILL ROAD**

City **WESTFORD** State **MA** Zip Code **01886**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145966

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
GERALDINE WINCH

Mailing Address **3601 KALISTE SALOOM RD
APT 205**

City **LAFAYETTE** State **LA** Zip Code **70508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SKY HIGH** Occupation **VOLUNTEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
221.20

Transaction ID : SA17A.145999

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

221.20

C. Full Name (Last, First, Middle Initial)
KENNY WINN

Mailing Address **11953 S INDIAN RIVER DR**

City **JENSEN BEACH** State **FL** Zip Code **34957**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOURNEYPURE** Occupation **MARKETER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.146121

Date of Receipt

08 / 20 / 2015

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional)..... **971.20**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
VIRGINIA WINSTON

Mailing Address **802 PINE VVALLEY**

City **LUFKIN** State **TX** Zip Code **75901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.146173

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
JOHN WINWARD

Mailing Address **5133 KILLDEE STREET**

City **LONG BEACH** State **CA** Zip Code **90808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.146253

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
JOHN WINWARD

Mailing Address **5133 KILLDEE STREET**

City **LONG BEACH** State **CA** Zip Code **90808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.146254

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2015

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 100.00

Subtotal Of Receipts This Page (optional).....▶ **1200.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN WINWARD

Mailing Address 5133 KILLDEE STREET

City	State	Zip Code
LONG BEACH	CA	90808

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 ▼
 _____ 500.00

Transaction ID : SA17A.146255

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2015

Amount of Each Receipt this Period

_____ 100.00

B. Full Name (Last, First, Middle Initial)
JAMES WISE

Mailing Address 1844 EAST 31ST PLACE

City	State	Zip Code
TULSA	OK	74105

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SENAX	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 220.00

Transaction ID : SA17A.146333

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

_____ 220.00

C. Full Name (Last, First, Middle Initial)
RUSSELL WISEMAN

Mailing Address 12020 COUNTRY VALLEY DRIVE

City	State	Zip Code
ARLINGTON	TN	38002

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CITY LEASING LLC	COO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17A.146356

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

_____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1320.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 725 / 1212

<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT WISSEL

Mailing Address 40 D COURT D

City State Zip Code
BRICK NJ 08724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OMC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Transaction ID : SA17A.146378

Date of Receipt
M M / D D / Y Y Y Y
08 10 2015

Amount of Each Receipt this Period
201.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY WISSMAN

Mailing Address 4593 ROANOAK WAY

City State Zip Code
PALM HARBOR FL 34685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MERCK & CO INC SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.146384

Date of Receipt
M M / D D / Y Y Y Y
08 09 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GARY & SUSAN WITTIG

Mailing Address 1140 AMARILLO DRIVE

City State Zip Code
GARDNERVILLE NV 89460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SIMPLE PUMP COMPANY BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.146468

Date of Receipt
M M / D D / Y Y Y Y
08 03 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1451.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) EDWARD J WNOROWSKI		Transaction ID : SA17A.146517	
Mailing Address 11307 RIVER KNOLL DR.		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2015	
City JACKSONVILLE	State FL	Zip Code 32225	
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 484.95	
		Amount of Each Receipt this Period 25.00	

B. Full Name (Last, First, Middle Initial) ROBERT WOLTER		Transaction ID : SA17A.146803	
Mailing Address 3913 BAY SHORE DRIVE		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2015	
City STURGEON BAY	State WI	Zip Code 54235	
FEC ID number of contributing federal political committee.		C	
Name of Employer CBS GLOBAL	Occupation M&A ADVISOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	
		Amount of Each Receipt this Period 250.00	

C. Full Name (Last, First, Middle Initial) HARVEY WONG		Transaction ID : SA17A.146851	
Mailing Address 3855 W 104TH DRIVE UNIT B		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2015	
City WESTMINSTER	State CO	Zip Code 80031	
FEC ID number of contributing federal political committee.		C	
Name of Employer MWH	Occupation AUDITOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 260.55	
		Amount of Each Receipt this Period 260.55	

Subtotal Of Receipts This Page (optional).....▶ 535.55

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
HARVEY WONG

Mailing Address **3855 W 104TH DRIVE
UNIT B**

City **WESTMINSTER** State **CO** Zip Code **80031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MWH** Occupation **AUDITOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
648.26

Transaction ID : SA17A.146852

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period
387.71

B. Full Name (Last, First, Middle Initial)
HARVEY WONG

Mailing Address **3855 W 104TH DRIVE
UNIT B**

City **WESTMINSTER** State **CO** Zip Code **80031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MWH** Occupation **AUDITOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
387.71

Transaction ID : SA17A.146854

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2015

CONTRIBUTION REFUND

Amount of Each Receipt this Period
-260.55

C. Full Name (Last, First, Middle Initial)
HARVEY WONG

Mailing Address **3855 W 104TH DRIVE
UNIT B**

City **WESTMINSTER** State **CO** Zip Code **80031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MWH** Occupation **AUDITOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
775.42

Transaction ID : SA17A.146853

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period
387.71

Subtotal Of Receipts This Page (optional).....▶ **514.87**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
SHANNON WONG

Mailing Address **3838 HUNTERWOOD POINT**

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	OPHTHALMOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.146863

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
WALTER WOOD

Mailing Address **10441 HOLLYHOCK CT.**

City	State	Zip Code
HIGHLANDS RANCH	CO	80129

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
COOLING TOWER SERVICES, INC.	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 215.94

Transaction ID : SA17A.147001

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2015			

Amount of Each Receipt this Period
 _____ 107.97

C. Full Name (Last, First, Middle Initial)
WENDY WOOD

Mailing Address **2140 WELCH AVE**

City	State	Zip Code
GARNER	IA	50438

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DANDYLAND FARMS	GRAIN PRODUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 480.03

Transaction ID : SA17A.147003

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			23			2015			

Amount of Each Receipt this Period
 _____ 480.03

Subtotal Of Receipts This Page (optional).....▶ _____ 838.00

Total This Period (last page this line number only).....▶ _____

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
LARRY WOODARD

Mailing Address **8503 PRESCOTT CIRCLE**

City State Zip Code
FRISCO TX 75033-6234

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 : SA17A.147031

Date of Receipt
M M / D D / Y Y Y Y
08 01 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN WOODBURY

Mailing Address **4091 MALLORY LANE-SUITE 128**

City State Zip Code
FRANKLIN TN 37067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COPY SOLUTIONS INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
216.31

Transaction ID : SA17A.147040

Date of Receipt
M M / D D / Y Y Y Y
09 09 2015

Amount of Each Receipt this Period
170.91

C. Full Name (Last, First, Middle Initial)
MICHAEL WOODRUFF

Mailing Address **2772 E. 2ND STREET, 1-H**

City State Zip Code
LONG BEACH CA 90803

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 : SA17A.147106

Date of Receipt
M M / D D / Y Y Y Y
07 31 2015

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **670.91**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JENNIFER WOODS

Mailing Address **7000 MAE ANNE AVE**

City	State	Zip Code
RENO	NV	89523

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	OWNER OF ART AND WINE STUDIO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.147121

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	5

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
JOHN WOODS

Mailing Address **PO BOX 10**

City	State	Zip Code
AMHERST	NH	03031

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
IDEAL CONSTRUCTION	GENERAL CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147123

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
THOMAS WOODS

Mailing Address **299 STRATFORD CT.**

City	State	Zip Code
LAKE MARY	FL	32746

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 : SA17A.147158

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	5

Amount of Each Receipt this Period

250.00

Subtotal Of Receipts This Page (optional).....▶ **1000.00**

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
PETER WORTH

Mailing Address 99 PARK AVENUE, 25TH FLOOR

City State Zip Code
NEW YORK NY 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WORTH CORPORATE PLANNING INSURANCE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.147317

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS WRIGHT

Mailing Address 156 MADISON WAY

City State Zip Code
ELLERSLIE GA 31807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROCK IT STONE, LLC NATIONAL SALES DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147429

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
H. JAMES WULFSBERG

Mailing Address 57 BELLEVUE AVENUE

City State Zip Code
PIEDMONT CA 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BWS, LLC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.147647

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 3950.00

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ANTONIA XEREAS

Mailing Address **1697 BROADWAY
11TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10019**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SHOW** Occupation **COSTUME DESIGNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.55

Transaction ID : SA17A.147750

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	5

Amount of Each Receipt this Period

260.55

B. Full Name (Last, First, Middle Initial)
DAN YAFFE

Mailing Address **4375 E OQUENDO RD**

City **LAS VEGAS** State **NV** Zip Code **89120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147803

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
JERRY YARBROUGH

Mailing Address **2305 S GREENWOOD AVE**

City **FORT SMITH** State **AR** Zip Code **72901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147888

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Amount of Each Receipt this Period

300.00

Subtotal Of Receipts This Page (optional)..... **660.55**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JERRY YARBROUGH

Mailing Address **2305 S GREENWOOD AVE**

City **FORT SMITH** State **AR** Zip Code **72901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.147889

Date of Receipt
 M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
JERRY YARBROUGH

Mailing Address **2305 S GREENWOOD AVE**

City **FORT SMITH** State **AR** Zip Code **72901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
657.10

Transaction ID : SA17A.147890

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2015

Amount of Each Receipt this Period
57.10

C. Full Name (Last, First, Middle Initial)
BRENDA YAVORSKY

Mailing Address **4124 SHADY OAKS DRIVE**

City **MARTINEZ** State **GA** Zip Code **30907**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
231.67

Transaction ID : SA17A.147971

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period
31.67

Subtotal Of Receipts This Page (optional)..... **388.77**

Total This Period (last page this line number only).....

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)	Transaction ID : SA17A.148097
CLARE YINGST	Date of Receipt
Mailing Address PRO BOX 56	MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">09 / 01 / 2015</div>
City: LEBANON State: PA Zip Code: 17042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee: C	<div style="border: 1px solid black; padding: 2px;">100.18</div>
Name of Employer: RETIRED Occupation: RETIRED	Election Cycle-to-Date ▼
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div style="border: 1px solid black; padding: 2px;">235.89</div>	<div style="border: 1px solid black; padding: 2px;">676.58</div>
B. Full Name (Last, First, Middle Initial)	Transaction ID : SA17A.148098
CLARE YINGST	Date of Receipt
Mailing Address PRO BOX 56	MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">09 / 08 / 2015</div>
City: LEBANON State: PA Zip Code: 17042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee: C	<div style="border: 1px solid black; padding: 2px;">76.40</div>
Name of Employer: RETIRED Occupation: RETIRED	Election Cycle-to-Date ▼
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div style="border: 1px solid black; padding: 2px;">312.29</div>	<div style="border: 1px solid black; padding: 2px;">676.58</div>
C. Full Name (Last, First, Middle Initial)	Transaction ID : SA17A.148102
PEDRO YLISTASTIGUI	Date of Receipt
Mailing Address 421 SHELDON AVE	MM / DD / YYYY <div style="border: 1px solid black; padding: 2px;">08 / 15 / 2015</div>
City: LEHIGH ACRES State: FL Zip Code: 33936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee: C	<div style="border: 1px solid black; padding: 2px;">500.00</div>
Name of Employer: PEDRO P YLISTASTIGUI, MD, PA Occupation: PHYSICIAN	Election Cycle-to-Date ▼
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div style="border: 1px solid black; padding: 2px;">500.00</div>	<div style="border: 1px solid black; padding: 2px;">676.58</div>

Subtotal Of Receipts This Page (optional).....	<div style="border: 1px solid black; padding: 2px;">676.58</div>
Total This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px;">676.58</div>

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
OLA YODER

Mailing Address 352 SHANWEE DR. PO BOX 350

City State Zip Code
NAPPANEE IN 46550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOUNTRY WOOD PRODUCTS LLC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.148134

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address POST OFFICE BOX 7571

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.148153

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address POST OFFICE BOX 7571

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.148154

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)			PAGE 737 / 1212			
<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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Transaction ID : SA17A.148155

Mailing Address POST OFFICE BOX 7571

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

City	State	Zip Code
THE WOODLANDS	TX	77387

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
YOLLIK LAW FIRM	ATTORNEY

Amount of Each Receipt this Period
100.00

Receipt For: 2016
 Primary General
 Other (specify) ▾

Election Cycle-to-Date ▾
500.00

B. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Transaction ID : SA17A.148156

Mailing Address POST OFFICE BOX 7571

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	5

City	State	Zip Code
THE WOODLANDS	TX	77387

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
YOLLIK LAW FIRM	ATTORNEY

Amount of Each Receipt this Period
100.00

Receipt For: 2016
 Primary General
 Other (specify) ▾

Election Cycle-to-Date ▾
600.00

C. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Transaction ID : SA17A.148157

Mailing Address POST OFFICE BOX 7571

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	5

City	State	Zip Code
THE WOODLANDS	TX	77387

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
YOLLIK LAW FIRM	ATTORNEY

Amount of Each Receipt this Period
100.00

Receipt For: 2016
 Primary General
 Other (specify) ▾

Election Cycle-to-Date ▾
700.00

Subtotal Of Receipts This Page (optional)..... **300.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Transaction ID : SA17A.148158

Date of Receipt

09 / 05 / 2015

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.148159

Date of Receipt

09 / 08 / 2015

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17A.148160

Date of Receipt

09 / 12 / 2015

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional)..... **400.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1300.00

Transaction ID : SA17A.148161

Date of Receipt
M M / D D / Y Y Y Y
09 13 2015

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17A.148162

Date of Receipt
M M / D D / Y Y Y Y
09 15 2015

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1600.00

Transaction ID : SA17A.148163

Date of Receipt
M M / D D / Y Y Y Y
09 15 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **500.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.148164

Date of Receipt
M M / D D / Y Y Y Y
09 16 2015

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Transaction ID : SA17A.148165

Date of Receipt
M M / D D / Y Y Y Y
09 16 2015

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
ERIC YOLLIK

Mailing Address **POST OFFICE BOX 7571**

City State Zip Code
THE WOODLANDS TX 77387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
YOLLIK LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2600.00

Transaction ID : SA17A.148166

Date of Receipt
M M / D D / Y Y Y Y
09 17 2015

Amount of Each Receipt this Period
300.00

Subtotal Of Receipts This Page (optional)..... **1000.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL YOUNGBLOOD

Mailing Address 40499 EMERALD LANE WEST

City	State	Zip Code
CLINTON TOWNSHIP	MI	48038

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PLASTIC SERVICE CENTERS INC	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.148470

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
AMANDA ZACHARY

Mailing Address 5903 E 500 N

City	State	Zip Code
LEESBURG	IN	46538

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.148609

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="211.95"/>

C. Full Name (Last, First, Middle Initial)
JOHN ZAFARANLOO

Mailing Address 235 DONGAN HILLS AVE
2A

City	State	Zip Code
STATEN ISLAND	NY	10305

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JOHN K ZAFARANLOO MD PC	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.148618

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JOHN ZAFARANLOO

Mailing Address **235 DONGAN HILLS AVE**
2A

City **STATEN ISLAND** State **NY** Zip Code **10305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN K ZAFARANLOO MD PC** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.148619

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN ZAFARANLOO

Mailing Address **235 DONGAN HILLS AVE**
2A

City **STATEN ISLAND** State **NY** Zip Code **10305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN K ZAFARANLOO MD PC** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
850.00

Transaction ID : SA17A.148620

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN ZAFARANLOO

Mailing Address **235 DONGAN HILLS AVE**
2A

City **STATEN ISLAND** State **NY** Zip Code **10305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JOHN K ZAFARANLOO MD PC** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
950.00

Transaction ID : SA17A.148621

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **600.00**

Total This Period (last page this line number only).....

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ERIC ZALUSKI

Mailing Address 2336 ICE HOUSE WAY

City State Zip Code
LEXINGTON KY 40509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PROSPECTTRAX INC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.148720

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ERIC ZALUSKI

Mailing Address 2336 ICE HOUSE WAY

City State Zip Code
LEXINGTON KY 40509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PROSPECTTRAX INC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
670.91

Transaction ID : SA17A.148721

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period
170.91

C. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City State Zip Code
VANCOUVER WA 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DREAM WORLD PARTNERS, INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.148866

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 770.91

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.148867

Date of Receipt

/ /

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.148868

Date of Receipt

/ /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.148869

Date of Receipt

/ /

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Transaction ID : SA17A.148870

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period
175.00

B. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Transaction ID : SA17A.148864

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST DR

City VANCOUVER State WA Zip Code 98683

FEC ID number of contributing federal political committee. **C**

Name of Employer DREAM WORLD PARTNERS, INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
645.00

Transaction ID : SA17A.148871

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2015

Amount of Each Receipt this Period
20.00

Subtotal Of Receipts This Page (optional).....▶ 245.00

Total This Period (last page this line number only).....▶

**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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
ARTHUR ZECKENDORF

Mailing Address **15 CENTRAL PARK W
APT 10D**

City **NEW YORK** State **NY** Zip Code **10023**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TERRA HOLDINGS** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17A.148906

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)
JACK ZIEMBA

Mailing Address **7400 RESEARCH DRIVE**

City **ALMONT** State **MI** Zip Code **48003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARISTO-CAST** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
544.30

Transaction ID : SA17A.149086

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

353.87

C. Full Name (Last, First, Middle Initial)
SUZANNE ZILKA

Mailing Address **5 ETON CT.**

City **SARATOGA SPRINGS** State **NY** Zip Code **12866**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NAIS** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
493.19

Transaction ID : SA17A.149114

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

493.19

Subtotal Of Receipts This Page (optional).....▶ **3547.06**

Total This Period (last page this line number only).....▶

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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
JONATHAN ZILKOW

Mailing Address **12961 MARCY RANCH ROAD**

City **SANTA ANA** State **CA** Zip Code **92705**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNIVERSAL HEALTH SERVICES** Occupation **HOSPITAL CHIEF FINANCIAL OFFICER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.149118

Date of Receipt
 M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SEBASTIAN ZITO

Mailing Address **34 SALTHILL COURT**

City **TIMONIUM** State **MD** Zip Code **21093**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BALTIMORE COUNTY POLICE DEPARTMENT** Occupation **BUDGET OFFICE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.149237

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ **1250.00**

Total This Period (last page this line number only).....▶ **1041004.55**

**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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1823796.87

Transaction ID : SA17D.150495

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2015

IN-KIND: RENT

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1824311.75

Transaction ID : SA17D.150384

Date of Receipt
M M / D D / Y Y Y Y
07 / 02 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
514.88

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1826886.18

Transaction ID : SA17D.150385

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

Subtotal Of Receipts This Page (optional).....▶ 18089.31

Total This Period (last page this line number only).....▶

**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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1830935.80

Transaction ID : SA17D.150386

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4049.62

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1833510.23

Transaction ID : SA17D.150387

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1837559.87

Transaction ID : SA17D.150388

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4049.64

Subtotal Of Receipts This Page (optional).....▶ 10673.69

Total This Period (last page this line number only).....▶

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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer: THE TRUMP ORGANIZATION Occupation: PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1837783.87

Transaction ID : SA17D.150510

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2015

IN-KIND: SOFTWARE SUBSCRIPTION

Amount of Each Receipt this Period
224.00

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer: THE TRUMP ORGANIZATION Occupation: PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1840358.30

Transaction ID : SA17D.150389

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer: THE TRUMP ORGANIZATION Occupation: PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1855358.30

Transaction ID : SA17D.150501

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2015

IN-KIND: RENT

Amount of Each Receipt this Period
15000.00

Subtotal Of Receipts This Page (optional).....▶ 17798.43

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1860316.68

Transaction ID : SA17D.150390

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4958.38

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1862030.00

Transaction ID : SA17D.150391

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
1713.32

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1864604.43

Transaction ID : SA17D.150392

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

Subtotal Of Receipts This Page (optional).....▶ 9246.13

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer **THE TRUMP ORGANIZATION** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1868731.76

Transaction ID : SA17D.150393

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4127.33

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer **THE TRUMP ORGANIZATION** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1871794.96

Transaction ID : SA17D.150394

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
3063.20

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer **THE TRUMP ORGANIZATION** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1875959.55

Transaction ID : SA17D.150395

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4164.59

Subtotal Of Receipts This Page (optional)..... **11355.12**

Total This Period (last page this line number only).....

**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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City NEW YORK	State NY	Zip Code 10022
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer THE TRUMP ORGANIZATION	Occupation PRESIDENT/CEO
---	------------------------------------

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1890959.55
---	---

Transaction ID : SA17D.150505

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2015

IN-KIND: RENT

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City NEW YORK	State NY	Zip Code 10022
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer THE TRUMP ORGANIZATION	Occupation PRESIDENT/CEO
---	------------------------------------

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1894914.09
---	---

Transaction ID : SA17D.150396

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
3954.54

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City NEW YORK	State NY	Zip Code 10022
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer THE TRUMP ORGANIZATION	Occupation PRESIDENT/CEO
---	------------------------------------

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1897375.03
---	---

Transaction ID : SA17D.150397

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2460.94

Subtotal Of Receipts This Page (optional).....▶ **21415.48**

Total This Period (last page this line number only).....▶

**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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1899949.46

Transaction ID : SA17D.150398

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

B. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1902523.89

Transaction ID : SA17D.150399

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2574.43

C. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** P80001571

Name of Employer Occupation
THE TRUMP ORGANIZATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1904984.83

Transaction ID : SA17D.150400

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
2460.94

Subtotal Of Receipts This Page (optional).....▶ 7609.80

Total This Period (last page this line number only).....▶

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 type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" 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)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

Mailing Address **725 FIFTH AVENUE**

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee. **C P80001571**

Name of Employer	Occupation
THE TRUMP ORGANIZATION	PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1909576.50

Transaction ID : SA17D.150401

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2015

IN-KIND: PRE-PAID PAYROLL (SEE 23B FOR MEMOS)

Amount of Each Receipt this Period
4591.67

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ **4591.67**

Total This Period (last page this line number only).....▶ **100779.63**

**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 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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
MOBILE CIVIC CENTER

Mailing Address 401 CIVIC CENTER DRIVE

City	State	Zip Code
MOBILE	AL	36602

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 7332.68

Transaction ID : SA20A.7443

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	1	5

REFUND: FACILITY RENTAL

Amount of Each Receipt this Period
 _____ 7332.68

B. Full Name (Last, First, Middle Initial)
STRIPE

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 362.79

Transaction ID : SA20A.7444

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	1	5

REFUND: MERCHANT FEES

Amount of Each Receipt this Period
 _____ 362.79

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
		/			/				

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ _____ 7695.47

Total This Period (last page this line number only).....▶ _____ 7695.47

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. 1 WAY AUDIO VISUAL SERVICES		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 244 FIFTH AVENUE, SUITE M260		Transaction ID : SB23.6856
City NEW YORK	State NY	
Zip Code 10001	Purpose of Disbursement AUDIO VISUAL SERVICES	Amount of Each Disbursement this Period 2732.76
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ACCESS A/V		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 8 INTEGRA DRIVE		Transaction ID : SB23.6858
City CONCORD	State NH	
Zip Code 03301	Purpose of Disbursement AUDIO VISUAL SERVICES	Amount of Each Disbursement this Period 1067.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6864
City LAFAYETTE	State LA	
Zip Code 70598	Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS	Amount of Each Disbursement this Period 40250.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 44049.76

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015	
Mailing Address PO BOX 80427		Transaction ID : SB23.6870	
City LAFAYETTE	State LA	Zip Code 70598	Amount of Each Disbursement this Period 51626.34
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS/DECALS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) B. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015	
Mailing Address PO BOX 80427		Transaction ID : SB23.6865	
City LAFAYETTE	State LA	Zip Code 70598	Amount of Each Disbursement this Period 70626.46
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015	
Mailing Address PO BOX 80427		Transaction ID : SB23.6862	
City LAFAYETTE	State LA	Zip Code 70598	Amount of Each Disbursement this Period 26020.00
Purpose of Disbursement COLLATERAL: T-SHIRTS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Subtotal Of Receipts This Page (optional)..... 148272.80

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6860
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: FREIGHT	Candidate Name	Amount of Each Disbursement this Period 24060.36
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6861
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: FREIGHT	Candidate Name	Amount of Each Disbursement this Period 39390.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) C. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6866
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS	Candidate Name	Amount of Each Disbursement this Period 52302.48
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 115753.48

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6867
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS		Amount of Each Disbursement this Period 117792.88
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6863
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: T-SHIRTS/FREIGHT		Amount of Each Disbursement this Period 5689.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6868
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS		Amount of Each Disbursement this Period 137558.80
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 261040.68

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.6869
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: T-SHIRTS/HATS		Amount of Each Disbursement this Period 5329.50
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 80427		Transaction ID : SB23.7433
City LAFAYETTE	State LA	
Purpose of Disbursement COLLATERAL: FREIGHT		Amount of Each Disbursement this Period 22167.91
Candidate Name		
Office 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:	

Full Name (Last, First, Middle Initial) C. ACS SOUND & LIGHTING		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 110 LOTT CT		Transaction ID : SB23.7479
City WEST COLUMBIA	State SC	
Purpose of Disbursement EVENT EXPENSE: EQUIPMENT RENTAL [SMITH: SB23.6684]		Amount of Each Disbursement this Period 302.28
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 27497.41

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ALAN COBB & ASSOCIATES		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 3429 SW STONYBROOK		Transaction ID : SB23.6871
City TOPEKA	State KS	
Zip Code 66614	Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ALAN COBB & ASSOCIATES		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 3429 SW STONYBROOK		Transaction ID : SB23.6872
City TOPEKA	State KS	
Zip Code 66614	Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 6220.36
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ALAN COBB & ASSOCIATES		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 3429 SW STONYBROOK		Transaction ID : SB23.6873
City TOPEKA	State KS	
Zip Code 66614	Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 26220.36

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. ALAN COBB & ASSOCIATES

Full Name (Last, First, Middle Initial)
Mailing Address 3429 SW STONYBROOK

City TOPEKA State KS Zip Code 66614

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2015

Transaction ID : SB23.6874

Amount of Each Disbursement this Period: 10000.00

Category/Type

B. ALAN COBB & ASSOCIATES

Full Name (Last, First, Middle Initial)
Mailing Address 3429 SW STONYBROOK

City TOPEKA State KS Zip Code 66614

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 22 / 2015

Transaction ID : SB23.6875

Amount of Each Disbursement this Period: 1995.59

Category/Type

C. ALOFT HOTEL

Full Name (Last, First, Middle Initial)
Mailing Address 1719 WEST END AVE

City NASHVILLE State TN Zip Code 37203

Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7327]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2015

Transaction ID : SB23.7488

Amount of Each Disbursement this Period: 239.39

Category/Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 11995.59

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7494
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]		Amount of Each Disbursement this Period 341.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7495
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]		Amount of Each Disbursement this Period 407.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7496
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]		Amount of Each Disbursement this Period 828.20
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7497
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Amount of Each Disbursement this Period 407.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7498
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Amount of Each Disbursement this Period 407.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7513
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL: AIR [HEWITT: SB23.6757]	Amount of Each Disbursement this Period 573.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7514
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [HEWITT: SB23.6757]		Amount of Each Disbursement this Period 343.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7515
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [HEWITT: SB23.6757]		Amount of Each Disbursement this Period 513.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7516
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [GRISHAM: SB23.6816]		Amount of Each Disbursement this Period 161.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7506
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [SCAVIANO: SB23.6649]		Amount of Each Disbursement this Period 600.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7517
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: TRANSACTION FEE [DECK: SB23.7394]		Amount of Each Disbursement this Period 25.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7518
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [DECK: SB23.7394]		Amount of Each Disbursement this Period 576.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7519
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 1106.60	
Purpose of Disbursement TRAVEL: AIR [DECK: SB23.7394]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7511
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 618.70	
Purpose of Disbursement TRAVEL: AIR [KAREM: SB23.6742]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7512
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement TRAVEL: TRANSACTION FEE [KAREM: SB23.6742]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7499
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 691.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7500
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 691.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7501
City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 631.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7502
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Zip Code 76155	Amount of Each Disbursement this Period 631.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7509
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6733]	Zip Code 76155	Amount of Each Disbursement this Period 226.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7510
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6733]	Zip Code 76155	Amount of Each Disbursement this Period 226.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → 0.00

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7507
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL: TRANSACTION FEE [DECK: SB23.6660]	
Candidate Name	Category/Type	Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7508
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL: TRANSACTION FEE [DECK: SB23.6660]	
Candidate Name	Category/Type	Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7505
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6647]	
Candidate Name	Category/Type	Amount of Each Disbursement this Period 552.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7503
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIRFARE [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 833.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 4333 AMON CARTER BLVD		Transaction ID : SB23.7504
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL: AIRFARE [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 50.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 200 VESEY ST		Transaction ID : SB23.6877
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES		Amount of Each Disbursement this Period 24900.50
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 24900.50

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 200 VESEY ST		Transaction ID : SB23.6878
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES		Amount of Each Disbursement this Period 21896.96
Candidate Name		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 200 VESEY ST		Transaction ID : SB23.6879
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES		Amount of Each Disbursement this Period 632.92
Candidate Name		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMTRAK		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 60 MASSACHUSETTS AVENUE NE		Transaction ID : SB23.7532
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: RAIL [JOST: SB23.6849]		Amount of Each Disbursement this Period 191.00
Candidate Name		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 22529.88

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 60 MASSACHUSETTS AVENUE NE		Transaction ID : SB23.7528
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: RAIL [NUNBERG: SB23.6811]		Amount of Each Disbursement this Period 255.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMTRAK		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 60 MASSACHUSETTS AVENUE NE		Transaction ID : SB23.7529
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: RAIL [AMEX: SB23.6877]		Amount of Each Disbursement this Period 77.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AMTRAK		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 60 MASSACHUSETTS AVENUE NE		Transaction ID : SB23.7530
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: RAIL [C&M: SB23.6896]		Amount of Each Disbursement this Period 211.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 60 MASSACHUSETTS AVENUE NE		Transaction ID : SB23.7531
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: RAIL [C&M: SB23.6896]		Amount of Each Disbursement this Period 184.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ANGELAS PASTA		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 815 CHESTNUT STREET		Transaction ID : SB23.7534
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: MEETING EXPENSE [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 937.40
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. APPLEBEES		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 1273 HOOKSETT ROAD		Transaction ID : SB23.7539
City HOOKSETT	State NH	
Purpose of Disbursement TRAVEL: MEETING EXPENSE [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 271.74
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. APPLEBEES

Full Name (Last, First, Middle Initial)
Mailing Address 1273 HOOKSETT ROAD

City HOOKSETT State NH Zip Code 03106

Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 22 / 2015

Transaction ID : SB23.7540

Amount of Each Disbursement this Period: 53.18

[MEMO ITEM]

B. APPLE TREE INN

Full Name (Last, First, Middle Initial)
Mailing Address 1215 N JEFFERSON WAY

City INDIANOLA State IA Zip Code 50125

Purpose of Disbursement TRAVEL: LODGING [NAGEL: SB23.6629]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 14 / 2015

Transaction ID : SB23.7537

Amount of Each Disbursement this Period: 80.64

[MEMO ITEM]

C. ASIT CONSULTING LLC

Full Name (Last, First, Middle Initial)
Mailing Address 13300 W 172ND STREET

City OVERLAND PARK State KS Zip Code 66221

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2015

Transaction ID : SB23.6881

Amount of Each Disbursement this Period: 5031.99

Subtotal Of Receipts This Page (optional)..... 5031.99

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. ASIT CONSULTING LLC

Full Name (Last, First, Middle Initial)
Mailing Address 13300 W 172ND STREET

City OVERLAND PARK State KS Zip Code 66221

Purpose of Disbursement
EVENT STAGING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB23.7445

Amount of Each Disbursement this Period
7783.00

Category/Type: 101

B. ASIT CONSULTING LLC

Full Name (Last, First, Middle Initial)
Mailing Address 13300 W 172ND STREET

City OVERLAND PARK State KS Zip Code 66221

Purpose of Disbursement
TRAVEL: MILEAGE [ASIT CONSULTING: SB23.6881]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB23.7553

Amount of Each Disbursement this Period
1499.88

Category/Type:

[MEMO ITEM]

C. AV CONCEPTS

Full Name (Last, First, Middle Initial)
Mailing Address 1917 W. 1ST STREET

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement
AUDIO VISUAL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 10 / 2015

Transaction ID : SB23.6883

Amount of Each Disbursement this Period
6695.99

Category/Type:

Subtotal Of Receipts This Page (optional)..... 14478.99

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7566
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [UHER: SB23.6673]		Amount of Each Disbursement this Period 134.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7567
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7568
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7569
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7570
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7571
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7572
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7573
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. AVIS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7574
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [UHER: SB23.6674]		Amount of Each Disbursement this Period 67.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7578
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCENTEE: SB23.6730]		Amount of Each Disbursement this Period 78.96
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AVIS		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7575
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [UHER: SB23.6675]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. AVIS		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7576
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [UHER: SB23.6675]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7577
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [UHER: SB23.6675]		Amount of Each Disbursement this Period 67.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AVIS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 6 SYLVAN WAY		Transaction ID : SB23.7579
City PARSIPPANY	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [MCENTEE: SB23.6734]		Amount of Each Disbursement this Period 81.45
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. STUART AXELROD		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 4701 OLEANDER DRIVE		Transaction ID : SB23.6836
City MYRTLE BEACH	State SC	
Purpose of Disbursement RENT		Amount of Each Disbursement this Period 4500.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 4500.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. B-SQUARED PRINTING		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 104 w 29TH STE 7		Transaction ID : SB23.7583
City NEW YORK	State NY	
Zip Code 10001	Purpose of Disbursement PRINTING & DESIGN SERVICES [AMEX: SB23.6878]	Amount of Each Disbursement this Period 446.39
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BELLMORES AIRPORT SERVICE		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1 CORPORATE PARK DRIVE UNIT 7		Transaction ID : SB23.7604
City DERRY	State NH	
Zip Code 03038	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]	Amount of Each Disbursement this Period 104.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BELLMORES AIRPORT SERVICE		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1 CORPORATE PARK DRIVE UNIT 7		Transaction ID : SB23.7601
City DERRY	State NH	
Zip Code 03038	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 109.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BELLMORES AIRPORT SERVICE		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1 CORPORATE PARK DRIVE UNIT 7		Transaction ID : SB23.7602
City DERRY	State NH	
Zip Code 03038	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 104.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. BELLMORES TRANSPORTATION		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address CORPORATE PARK DR		Transaction ID : SB23.7607
City DERRY	State NH	
Zip Code 03038	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]	Amount of Each Disbursement this Period 104.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. BELLMORES TRANSPORTATION		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address CORPORATE PARK DR		Transaction ID : SB23.7608
City DERRY	State NH	
Zip Code 03038	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]	Amount of Each Disbursement this Period 104.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. BELLMORES TRANSPORTATION

Mailing Address CORPORATE PARK DR

City DERRY State NH Zip Code 03038

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Transaction ID : SB23.7609

Amount of Each Disbursement this Period

000	.	00
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BEST BUY

Mailing Address 78 DAMANTE DRIVE

City CONCORD State NH Zip Code 03301

Purpose of Disbursement
OFFICE SUPPLIES [GEORGEVITS: SB23.6617]

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Transaction ID : SB23.7611

Amount of Each Disbursement this Period

699	.	99
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BEST WESTERN

Mailing Address 1730 CENTINELA AVENUE

City INGLEWOOD State CA Zip Code 90302

Purpose of Disbursement
TRAVEL: LODGING [LAUDNER: SB23.6647]

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2015

Transaction ID : SB23.7620

Amount of Each Disbursement this Period

228	.	68
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[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. BEVERLY WILSHIRE

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
07 / 31 / 2015

Mailing Address PO BOX 73
Transaction ID : SB23.7624

City BOCA RATON State FL Zip Code 33429
Amount of Each Disbursement this Period: 2758.71

Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6877]
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
[MEMO ITEM]

State: District:

B. BIG GEYSER, INC.

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
07 / 22 / 2015

Mailing Address 57-65 48TH ST
Transaction ID : SB23.6884

City MASPETH State NY Zip Code 11378
Amount of Each Disbursement this Period: 292.00

Purpose of Disbursement UTILITIES
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

C. BIG GEYSER, INC.

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
08 / 17 / 2015

Mailing Address 57-65 48TH ST
Transaction ID : SB23.6885

City MASPETH State NY Zip Code 11378
Amount of Each Disbursement this Period: 146.00

Purpose of Disbursement UTILITIES
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Subtotal Of Receipts This Page (optional)..... 438.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BLOOM'S TAVERN		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 208 E 58TH ST		Transaction ID : SB23.7634
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement MEETING EXPENSE: MEALS [GREEN MONSTER: SB23.7033]	Amount of Each Disbursement this Period 3,000.00 120.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BLOOM'S TAVERN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 208 E 58TH ST		Transaction ID : SB23.7632
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement MEETING EXPENSE: MEALS [AMEX: SB23.6878]	Amount of Each Disbursement this Period 3,000.00 38.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DOROTHY BLUMENTHAL		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 502 PARK AVENUE TRUMP HOTEL 8F		Transaction ID : SB23.6657
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Amount of Each Disbursement this Period 3,000.00 3500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3500.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DOROTHY BLUMENTHAL		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 502 PARK AVENUE TRUMP HOTEL 8F		Transaction ID : SB23.6658
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Amount of Each Disbursement this Period 3500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ERNIE BOCH		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 190 SUMNER STREET		Transaction ID : SB23.7397
City NORWOOD	State MA	
Zip Code 02062	Purpose of Disbursement In-kind - EVENT CATERING - REFUNDED \$84,236.80 ON 9/30	Amount of Each Disbursement this Period 86936.80
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BODY POLITIC, LLC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.6886
City DES MOINES	State IA	
Zip Code 50313	Purpose of Disbursement FIELD CONSULTING	Amount of Each Disbursement this Period 4000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 94436.80

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BODY POLITIC, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.6887
City DES MOINES	State IA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. BODY POLITIC, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.6888
City DES MOINES	State IA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. BOONE AREA CHAMBER OF COMMERCE		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 903 STORY STREET		Transaction ID : SB23.6890
City BOONE	State IA	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 9000.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. B SQUARED PRINTING		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015	
Mailing Address 104 W 29TH STREET		Transaction ID : SB23.7581	
City NEW YORK	State NY	Zip Code 10001	Amount of Each Disbursement this Period 578.06
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GREEN MONSTER: SB23.7033]		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]	
Full Name (Last, First, Middle Initial) B. ROY BURNS		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015	
Mailing Address 15738 CALLE HERMOSA		Transaction ID : SB23.6804	
City GREEN VALLEY	State CA	Zip Code 91390	Amount of Each Disbursement this Period 240.00
Purpose of Disbursement SECURITY SERVICES		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]	
Full Name (Last, First, Middle Initial) C. BWI AIRPORT MARRIOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 1743 W NURSERY RD		Transaction ID : SB23.7667	
City LINTHICUM HEIGHTS	State MD	Zip Code 21030	Amount of Each Disbursement this Period 315.27
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6877]		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]	

Subtotal Of Receipts This Page (optional)..... → 240.00

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BWI AIRPORT MARRIOT		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1743 W NURSERY RD		Transaction ID : SB23.7668
City LINTHICUM HEIGHTS	State MD Zip Code 21030	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6877]	Category/Type	Amount of Each Disbursement this Period 380.90
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. C & J		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 185 GRAFTON RD		Transaction ID : SB23.7670
City PORTSMOUTH	State NH Zip Code 03801	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6616]	Category/Type	Amount of Each Disbursement this Period 320.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. C&M TRANSCONTINENTAL, LLC		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 34 MAPLE AVENUE		Transaction ID : SB23.6894
City MENDHAM	State NJ Zip Code 07945	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type	Amount of Each Disbursement this Period 20000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 20000.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. C&M TRANSCONTINENTAL, LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 34 MAPLE AVENUE		Transaction ID : SB23.6895
City MENDHAM State NJ Zip Code 07945	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. C&M TRANSCONTINENTAL, LLC		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 34 MAPLE AVENUE		Transaction ID : SB23.6896
City MENDHAM State NJ Zip Code 07945	Amount of Each Disbursement this Period 4458.86	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CAFE FIORELLO		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1900 BROADWAY		Transaction ID : SB23.7677
City NEW YORK State NY Zip Code 10023	Amount of Each Disbursement this Period 212.41	
Purpose of Disbursement MEETING EXPENSE: MEALS [MCMULLEN: SB23.7057]	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 24458.86

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CALI-FAME		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6898
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 11438.39	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CALI-FAME		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6899
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 45257.39	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CALI-FAME		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6900
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 2051.04	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → 58746.82

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CALI-FAME		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6901
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 17577.71	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CALI-FAME		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6902
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 46197.90	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CALI-FAME		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6903
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 56198.56	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 119974.17

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CALI-FAME		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 20934 S. SANTA FE AVE.		Transaction ID : SB23.6904
City CARSON State CA Zip Code 90810	Amount of Each Disbursement this Period 94947.82	
Purpose of Disbursement COLLATERAL: HATS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. CANDLEWOOD SUITES		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 5 YOUNG CLYDE COURT		Transaction ID : SB23.7681
City BLUFFTON State SC Zip Code 29909	Amount of Each Disbursement this Period 312.40	
Purpose of Disbursement TRAVEL: LODGING [SMITH: SB23.6681]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. CANDLEWOOD SUITES		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 5 YOUNG CLYDE COURT		Transaction ID : SB23.7682
City BLUFFTON State SC Zip Code 29909	Amount of Each Disbursement this Period 366.30	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6693]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 94947.82

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CENTER OPERATING CO. LP		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 2500 VICTORY AVE. EVENT PROCEEDS CLEARING		Transaction ID : SB23.6906
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period 65000.00	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CENTER OPERATING CO. LP		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 2500 VICTORY AVE. EVENT PROCEEDS CLEARING		Transaction ID : SB23.6907
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CENTER OPERATING CO. LP		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 2500 VICTORY AVE. EVENT PROCEEDS CLEARING		Transaction ID : SB23.6908
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period 38725.19	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 108725.19

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CENTER OPERATING CO. LP		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 2500 VICTORY AVE. EVENT PROCEEDS CLEARING		Transaction ID : SB23.6909
City DALLAS State TX Zip Code 75219	Amount of Each Disbursement this Period 3173.96	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6910
City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement BANK FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6911
City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement BANK FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3203.96

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6912
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6913
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6914
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6915
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6916
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6917
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 800 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6918
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6919
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6920
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Subtotal Of Receipts This Page (optional)..... 45.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6921
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6922
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6923
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6924
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6925
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 10.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6926
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 40.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6927
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period \$ 40.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6928
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period \$ 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6929
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period \$ 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... **70.00**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6930
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6931
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6932
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6933
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6934
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6935
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6936
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6937
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6938
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 45.00

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ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6939
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6940
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6941
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6942
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6943
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6944
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 10.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Subtotal Of Receipts This Page (optional)..... 40.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6945
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6946
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6947
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6948
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6949
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6950
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 55.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6951
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6952
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6953
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6954
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6955
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6956
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	Category/ Type

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6957
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period \$ 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6958
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period \$ 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6959
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period \$ 15.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... → \$ 45.00

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6960
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6961
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6962
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6963
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6964
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6965
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 45.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6966
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1445-A LAUGHLIN AVENUE		Transaction ID : SB23.6967
City MCLEAN	State VA	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 92.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.6751
City DENVER	State CO	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 947.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 1055.40

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.6752
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 1242.88	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.9294
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement NON-CASH PER DIEM [CHMIELEWSKI: SB23.6751]	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.9295
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement NON-CASH PER DIEM [CHMIELEWSKI: SB23.6752]	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 1242.88

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.6753
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 1208.66	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.9296
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement NON-CASH PER DIEM [CHMIELEWSKI: SB23.6753]	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.6754
City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 955.63	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2164.29

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. KEVIN CHMIELEWSKI		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 4400 S MONACO STREET APARTMENT 922		Transaction ID : SB23.7456
City DENVER	State CO	
Purpose of Disbursement FIELD CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 615.00
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) B. JAE CHO		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.6702
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 910.64
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. JAE CHO		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.6703
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 4317.03
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5842.67

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EMILY CHUMACEIRO		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 1506 PONDCREST LANE		Transaction ID : SB23.6662
City WHITE PLAINS	State NY	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. EMILY CHUMACEIRO		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1506 PONDCREST LANE		Transaction ID : SB23.6663
City WHITE PLAINS	State NY	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1600.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. EMILY CHUMACEIRO		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 1506 PONDCREST LANE		Transaction ID : SB23.6665
City WHITE PLAINS	State NY	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 24.42
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... → 2824.42

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MATTHEW CIEPIELOWSKI		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 121 COUNTRY CLUB DRIVE #31		Transaction ID : SB23.6767
City MANCHESTER	State NH	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 8000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. CIRCLE K		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 28 WEST RIVER ROAD		Transaction ID : SB23.7738
City HOOKSETT	State NH	
Purpose of Disbursement TRAVEL: FUEL [GEORGEVITS: SB23.6616]	Candidate Name	Amount of Each Disbursement this Period 49.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. CITY OF DUBUQUE		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address CITY HALL, 50 W. 13TH STREET ATTN: CITY TREASURER		Transaction ID : SB23.6969
City DUBUQUE	State IA	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Amount of Each Disbursement this Period 756.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 8756.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CITY OF PHOENIX		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PHOENIX CONVENTION CENTER 100 N 3RD STREET		Transaction ID : SB23.7757
City PHOENIX	State AZ	
Purpose of Disbursement FACILITY RENTAL [GREEN MONSTER: SB23.7029]		Amount of Each Disbursement this Period 7803.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CITY OF ROCHESTER		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 150 WAKEFIELD ST. SUITE #1		Transaction ID : SB23.6971
City ROCHESTER	State NH	
Purpose of Disbursement FACILITY RENTAL		Amount of Each Disbursement this Period 2580.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SAM CLOVIS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 23689 C60		Transaction ID : SB23.6808
City HINTON	State IA	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Amount of Each Disbursement this Period 2666.67
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5246.67

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SAM CLOVIS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 23689 C60		Transaction ID : SB23.6809
City HINTON	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 993.94
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. SAM CLOVIS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 23689 C60		Transaction ID : SB23.9304
City HINTON	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [CLOVIS: SB23.6809]	Category/ Type	Amount of Each Disbursement this Period 567.54
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. COLONIAL TAG AND LABEL		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 425 NORTHERN BLVD SUITE 36		Transaction ID : SB23.6972
City GREAT NECK	State NY	
Purpose of Disbursement PRINTING: T-SHIRTS	Category/ Type	Amount of Each Disbursement this Period 6072.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... **7065.94**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. COLONIAL TRAILWAYS		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 2521 HALLS MILL ROAD		Transaction ID : SB23.6974
City MOBILE	State AL	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 5120.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. COMCAST		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address PO BOX 1577		Transaction ID : SB23.6978
City NEWARK	State NJ	
Purpose of Disbursement UTILITIES		Amount of Each Disbursement this Period 710.69
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. COMCAST		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 1 COMCAST CENTER		Transaction ID : SB23.7773
City PHILADELPHIA	State PA	
Purpose of Disbursement UTILITIES [AMEX: SB23.6879]		Amount of Each Disbursement this Period 479.72
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5830.69

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. COMFORT INN		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2401 A AVENUE WEST		Transaction ID : SB23.7776
City OSKALOOSA	State IA Zip Code 52577	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6643]		Amount of Each Disbursement this Period 6,000.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. COMMON SENSE MEDIA LLC		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 306 PRESERVATION REACH		Transaction ID : SB23.6980
City CHESAPEAKE	State VA Zip Code 23320	
Purpose of Disbursement MEDIA PLACEMENT: RADIO		Amount of Each Disbursement this Period 6,000.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. COMMON SENSE MEDIA LLC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 306 PRESERVATION REACH		Transaction ID : SB23.6981
City CHESAPEAKE	State VA Zip Code 23320	
Purpose of Disbursement MEDIA PLACEMENT: RADIO		Amount of Each Disbursement this Period 6,000.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 6000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. COMMONWEALTH ELECTRIC COMPANY		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 100 NORTH THIRD STREET		Transaction ID : SB23.6983
City PHOENIX	State AZ	
Purpose of Disbursement EVENT STAGING EXPENSE	Zip Code 85004	Amount of Each Disbursement this Period 3289.22
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CONSTANT CONTACT		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1601 TRAPELO RD		Transaction ID : SB23.7782
City WALTHAM	State MA	
Purpose of Disbursement EMAIL MARKETING [AMEX: SB23.6877]	Zip Code 02451	Amount of Each Disbursement this Period 243.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CONTEMPORARY SERVICES CORPORATION		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 17101 SUPERIOR STREET		Transaction ID : SB23.6985
City NORTHRIDGE	State CA	
Purpose of Disbursement SECURITY SERVICES	Zip Code 91325	Amount of Each Disbursement this Period 3186.62
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6475.84

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. COURTYARD BY MARRIOTT		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 70 ORCHARD PARK DRIVE		Transaction ID : SB23.7800
City GREENVILLE State SC Zip Code 29615	Amount of Each Disbursement this Period 223.02	
Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6733]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. COURTYARD BY MARRIOTT		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 70 ORCHARD PARK DRIVE		Transaction ID : SB23.7801
City GREENVILLE State SC Zip Code 29615	Amount of Each Disbursement this Period 223.02	
Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6733]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. CREATIVE SERVICES		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 221 W MAIN STREET		Transaction ID : SB23.7810
City CHEROKEE State IA Zip Code 51012	Amount of Each Disbursement this Period 258.43	
Purpose of Disbursement PRINTING AND DESIGN SERVICES [HUPKE: SB23.6640]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CUT LAS VEGAS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 3325 S LAS VEGAS BLVD		Transaction ID : SB23.7830
City LAS VEGAS	State NV	
Purpose of Disbursement CATERING SERVICES [AMEX: SB23.6878]		Amount of Each Disbursement this Period 287.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. DC CONNECT		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 7102 S. OAK HILL CIR.		Transaction ID : SB23.6986
City AURORA	State CO	
Purpose of Disbursement TELEMARKETING		Amount of Each Disbursement this Period 9428.37
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. DC CONNECT		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 7102 S. OAK HILL CIR.		Transaction ID : SB23.6987
City AURORA	State CO	
Purpose of Disbursement TELEMARKETING		Amount of Each Disbursement this Period 4977.90
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 14406.27

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ISABELLA DEBONO		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 7 CARSTENSEN ROAD		Transaction ID : SB23.6701
City SCARSDALE	State NY	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Zip Code 10583	Amount of Each Disbursement this Period 1200.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EDDIE DECK		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7384
City GREENWICH	State CT	
Purpose of Disbursement SECURITY SERVICES	Zip Code 06830	Amount of Each Disbursement this Period 1605.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EDDIE DECK		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7385
City GREENWICH	State CT	
Purpose of Disbursement SECURITY SERVICES	Zip Code 06830	Amount of Each Disbursement this Period 1881.25
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4686.25

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EDDIE DECK		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7386
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 2675.00	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EDDIE DECK		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7393
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 226.07	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EDDIE DECK		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7387
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3151.07

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EDDIE DECK		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7388
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 6726.32	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EDDIE DECK		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7389
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 2140.00	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EDDIE DECK		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7394
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 1937.93	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 10804.25

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EDDIE DECK		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7390
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 2951.25	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EDDIE DECK		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7391
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 535.00	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EDDIE DECK		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.7392
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 5902.50	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 9388.75

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EDWARD DECK		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 47 LAFAYETTE PLACE		Transaction ID : SB23.6660
City GREENWICH State CT Zip Code 06830	Amount of Each Disbursement this Period 824.78	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PAUL DECOSTE		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6794
City GLENDALE State AZ Zip Code 85308	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement SECURITY SERVICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7844
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 487.10	
Purpose of Disbursement TRAVEL: AIR [MILLER: SB23.6608]	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 824.78

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7845
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [MILLER: SB23.6610]	Category/Type	Amount of Each Disbursement this Period 487.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7849
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Category/Type	Amount of Each Disbursement this Period 449.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7850
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Category/Type	Amount of Each Disbursement this Period 434.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 836 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7851
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Category/Type	Amount of Each Disbursement this Period 437.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7843
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIRFARE [GREEN MONSTER: SB23.7036]	Category/Type	Amount of Each Disbursement this Period 435.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7846
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Category/Type	Amount of Each Disbursement this Period 435.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7847
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Category/Type	Amount of Each Disbursement this Period 472.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7855
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7326]	Category/Type	Amount of Each Disbursement this Period 626.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7856
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7326]	Category/Type	Amount of Each Disbursement this Period 334.60
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7857
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7326]	Candidate Name	Amount of Each Disbursement this Period 290.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7852
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6729]	Candidate Name	Amount of Each Disbursement this Period 402.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. DELTA		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7853
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6730]	Candidate Name	Amount of Each Disbursement this Period 384.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7854
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6732]	Category/Type	Amount of Each Disbursement this Period 437.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7848
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [C&M: SB23.6896]	Category/Type	Amount of Each Disbursement this Period 452.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7872
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7322]	Category/Type	Amount of Each Disbursement this Period 594.60
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7873
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 515.10	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7322]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7874
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 296.10	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7323]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7875
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 463.60	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7324]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... → 0.00

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7876
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 459.60	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7324]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7877
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 459.60	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7324]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7870
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6644]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7871
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6644]	Category/Type	Amount of Each Disbursement this Period 25.00
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7859
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Category/Type	Amount of Each Disbursement this Period 472.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7860
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Category/Type	Amount of Each Disbursement this Period 435.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7861
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name	Amount of Each Disbursement this Period 435.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7862
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name	Amount of Each Disbursement this Period 219.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7878
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7325]	Candidate Name	Amount of Each Disbursement this Period 271.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7879
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7325]	Candidate Name	Amount of Each Disbursement this Period 476.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7880
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7325]	Candidate Name	Amount of Each Disbursement this Period 614.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7881
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7327]	Candidate Name	Amount of Each Disbursement this Period 779.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7882
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7327]	Candidate Name	Amount of Each Disbursement this Period 797.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7883
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7327]	Candidate Name	Amount of Each Disbursement this Period 398.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7884
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7327]	Candidate Name	Amount of Each Disbursement this Period 294.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7885
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [TELION: SB23.7327]	Category/Type	Amount of Each Disbursement this Period 198.60
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7863
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Category/Type	Amount of Each Disbursement this Period 322.10
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7864
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Category/Type	Amount of Each Disbursement this Period 19.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7865
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 608.20	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7866
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 69.00	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7867
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period 69.00	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7868
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Category/Type	Amount of Each Disbursement this Period 363.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 1030 DELTA BLVD		Transaction ID : SB23.7869
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL: AIRFARE [GEORGEVITS: SB23.6618]	Category/Type	Amount of Each Disbursement this Period 645.10
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. DOLLAR RENTAL CAR		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 5330 E 31ST		Transaction ID : SB23.7900
City TULSA	State OK Zip Code 74135	
Purpose of Disbursement TRAVEL: CAR RENTAL [SCAVIANO: SB23.6649]	Category/Type	Amount of Each Disbursement this Period 707.14
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DORSETT PRODUCTIONS UNLIMITED, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address PO BOX 850157		Transaction ID : SB23.6989
City MOBILE State AL Zip Code 36685	Amount of Each Disbursement this Period 31725.00	
Purpose of Disbursement EVENT STAGING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FRED DOUCETTE		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address PO BOX 862		Transaction ID : SB23.6669
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FRED DOUCETTE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address PO BOX 862		Transaction ID : SB23.6670
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 37725.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6820
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 3200.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6821
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6822
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 1400.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5100.00

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6823
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period \$ 800.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6824
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period \$ 900.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STEVE DRAKE		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6825
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period \$ 1200.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional).....→ \$ 2900.00

Total This Period (last page this line number only).....→

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6829
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 1000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6830
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 200.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6831
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 600.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 1800.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6832
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 400.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6833
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 400.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STEWART DRAKE		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1623 EAST 17TH STREET		Transaction ID : SB23.6834
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 600.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 1400.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DRAKE VENTURES, LLC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 2524 BAYVIEW DRIVE		Transaction ID : SB23.6990
City FT. LAUDERDALE	State FL	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Amount of Each Disbursement this Period 10000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. DRAKE VENTURES, LLC		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 2524 BAYVIEW DRIVE		Transaction ID : SB23.6991
City FT. LAUDERDALE	State FL	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Amount of Each Disbursement this Period 10000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. GINA DURAND		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6695
City NEW YORK	State NY	
Purpose of Disbursement UTILITIES		Amount of Each Disbursement this Period 400.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 20400.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 855 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GINA DURAND		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6696
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement UTILITIES	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. DYNAMIC ADVERTISING SOLUTIONS		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 6060 RIDGE AVE. SUITE 200		Transaction ID : SB23.6992
City PHILADELPHIA	State PA	
Zip Code 19128	Purpose of Disbursement PRINTING: STICKERS	Amount of Each Disbursement this Period 743.46
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. MIKE EDMON		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2310 W. LONG SHADOW TRAIL		Transaction ID : SB23.6790
City PHOENIX	State AZ	
Zip Code 85085	Purpose of Disbursement SECURITY SERVICES	Amount of Each Disbursement this Period 300.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 2043.46

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6761
City OSCEOLA State IA Zip Code 50213	Amount of Each Disbursement this Period 1587.61	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.9298
City OSCEOLA State IA Zip Code 50213	Amount of Each Disbursement this Period 1587.61	
Purpose of Disbursement TRAVEL: MILEAGE [ELCOCK: SB23.6761]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6762
City OSCEOLA State IA Zip Code 50213	Amount of Each Disbursement this Period 2601.84	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 4189.45

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.9299
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement TRAVEL: MILEAGE [ELCOCK: SB23.6762]	Category/Type	Amount of Each Disbursement this Period 2601.84
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6763
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	Amount of Each Disbursement this Period 1739.22
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.9300
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement TRAVEL: MILEAGE [ELCOCK: SB23.6763]	Category/Type	Amount of Each Disbursement this Period 1719.22
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 1739.22

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6764
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	Amount of Each Disbursement this Period 2685.83
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. MARC ELCOCK		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.9301
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement TRAVEL: MILEAGE [ELCOCK: SB23.6764]	Category/Type	Amount of Each Disbursement this Period 2685.83
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. ELCOCK LAW FIRM, PLC		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6994
City OSCEOLA	State IA Zip Code 50213	
Purpose of Disbursement FIELD CONSULTING	Category/Type	Amount of Each Disbursement this Period 3500.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 6185.83

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ELCOCK LAW FIRM, PLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6995
City OSCEOLA State IA Zip Code 50213	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ELCOCK LAW FIRM, PLC		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address P.O. BOX 472		Transaction ID : SB23.6996
City OSCEOLA State IA Zip Code 50213	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ELEGANT LIMOUSINE & CHARTER		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 5157 BLANCO ROAD BUILDING E		Transaction ID : SB23.6998
City SAN ANTONIO State TX Zip Code 78216	Amount of Each Disbursement this Period 3217.50	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 10217.50

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DEREK ELMORE		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2310 W. LONG SHADOW TRAIL		Transaction ID : SB23.6653
City PHOENIX	State AZ	
Zip Code 85085	Purpose of Disbursement SECURITY SERVICES	Amount of Each Disbursement this Period 330.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ELRAC, LLC		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 745 EAST MAIN ST		Transaction ID : SB23.7928
City STAMFORD	State CT	
Zip Code 06902	Purpose of Disbursement TRAVEL: CAR RENTAL [DECK: SB23.6660]	Amount of Each Disbursement this Period 243.40
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. ENTERPRISE		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7930
City ST. LOUIS	State MO	
Zip Code 63105	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]	Amount of Each Disbursement this Period 1497.82
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 330.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. ENTERPRISE

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Transaction ID : SB23.7931

Amount of Each Disbursement this Period

1	6	9	.	4	1
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ENTERPRISE

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Transaction ID : SB23.7932

Amount of Each Disbursement this Period

1	1	0	.	8	7
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ENTERPRISE

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Transaction ID : SB23.7933

Amount of Each Disbursement this Period

1	1	0	.	8	7
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[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ENTERPRISE		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7934
City ST. LOUIS	State MO	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 117.26
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ENTERPRISE		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7935
City ST. LOUIS	State MO	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 169.41
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. ENTERPRISE		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7936
City ST. LOUIS	State MO	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 86.58
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ENTERPRISE		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7937
City ST. LOUIS State MO Zip Code 63105	Amount of Each Disbursement this Period 1490.85	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GEORGEVITS: SB23.6616]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.7946
City ST. LOUIS State MO Zip Code 63105	Amount of Each Disbursement this Period 208.66	
Purpose of Disbursement TRAVEL: CAR RENTAL [CHMIELEWSKI: SB23.6753]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7940
City MANCHESTER State NH Zip Code 03103	Amount of Each Disbursement this Period 1490.85	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7941
City MANCHESTER State NH Zip Code 03103	Amount of Each Disbursement this Period 83.62	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7942
City MANCHESTER State NH Zip Code 03103	Amount of Each Disbursement this Period 83.62	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7943
City MANCHESTER State NH Zip Code 03103	Amount of Each Disbursement this Period 167.25	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7944
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 4,500.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ENTERPRISE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 526 SECOND STREET		Transaction ID : SB23.7945
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: CAR RENTAL [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 4,500.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. JAMES EPLEY		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 538 ABNER CREEK RD		Transaction ID : SB23.6705
City GREER	State SC	
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 4,500.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4500.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JAMES EPLEY		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 538 ABNER CREEK RD		Transaction ID : SB23.6707
City GREER	State SC	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 728.62
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. JAMES EPLEY		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 538 ABNER CREEK RD		Transaction ID : SB23.9286
City GREER	State SC	
Purpose of Disbursement TRAVEL: MILEAGE [EPLEY: SB23.6707]		Amount of Each Disbursement this Period 140.87
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. JAMES EPLEY		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 538 ABNER CREEK RD		Transaction ID : SB23.6706
City GREER	State SC	
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 4500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5228.62

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DENA ESPENSCHIED		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 324 3RD AVE #1		Transaction ID : SB23.9308
City QUANTICO	State VA	
Purpose of Disbursement TRAVEL: MILEAGE [DAILY DENA: SB23.7333]		Amount of Each Disbursement this Period 296.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. EVENT STRATEGIES		Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address 4416 WHEELER AVE.		Transaction ID : SB23.6999
City ALEXANDRIA	State VA	
Purpose of Disbursement EVENT STAGING EXPENSE		Amount of Each Disbursement this Period 15552.13
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. EVENT STRATEGIES		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 4416 WHEELER AVE.		Transaction ID : SB23.7000
City ALEXANDRIA	State VA	
Purpose of Disbursement EVENT STAGING EXPENSE		Amount of Each Disbursement this Period 13142.50
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... → 28694.63

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EVENT STRATEGIES		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 4416 WHEELER AVE.		Transaction ID : SB23.7001
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 8098.95	
Purpose of Disbursement EVENT STAGING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EVENT STRATEGIES		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 4416 WHEELER AVE.		Transaction ID : SB23.7002
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 21600.00	
Purpose of Disbursement EVENT STAGING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EVENT STRATEGIES		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 4416 WHEELER AVE.		Transaction ID : SB23.7003
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 19500.00	
Purpose of Disbursement EVENT STAGING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 49198.95

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EXPEDIA		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7953
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 436.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. EXPEDIA		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7954
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 266.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. EXPEDIA		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7955
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 758.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EXPEDIA		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7956
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 119.64
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. EXPEDIA		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7957
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 218.51
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. EXPEDIA		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7958
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6645]		Amount of Each Disbursement this Period 262.60
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EXPEDIA		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7959
City BELLEVUE	State WA	
Zip Code 98004	Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6645]	Amount of Each Disbursement this Period 0.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EXPEDIA		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7960
City BELLEVUE	State WA	
Zip Code 98004	Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6645]	Amount of Each Disbursement this Period 1817.88
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EXPEDIA		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7961
City BELLEVUE	State WA	
Zip Code 98004	Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6645]	Amount of Each Disbursement this Period 99.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. EXPEDIA		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 333 108TH AVENUE NE		Transaction ID : SB23.7962
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6646]		Amount of Each Disbursement this Period 601.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. FARO ITALIAN GRILL		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 70 ENDICOTT STREET NORTH		Transaction ID : SB23.7979
City LACONIA	State NH	
Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 50.01
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. FARO ITALIAN GRILL		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 70 ENDICOTT STREET NORTH		Transaction ID : SB23.7980
City LACONIA	State NH	
Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 50.01
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL & STATE ELECTION COMPANY		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 2000 PENNSYLVANIA AVE. NW STE. 300		Transaction ID : SB23.7005
City WASHINGTON	State DC	
Purpose of Disbursement PRINTING AND DESIGN SERVICES	Zip Code 20006	Amount of Each Disbursement this Period 7443.96
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8000
City MEMPHIS	State TN	
Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6642]	Zip Code 38120	Amount of Each Disbursement this Period 216.12
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8008
City MEMPHIS	State TN	
Purpose of Disbursement DELIVERY SERVICES [KAREM: SB23.6741]	Zip Code 38120	Amount of Each Disbursement this Period 238.58
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 7443.96

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**SCHEDULE B-P
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7984
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 18.70	
Purpose of Disbursement DELIVERY SERVICES [GREEN MONSTER: SB23.7028]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8005
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 235.39	
Purpose of Disbursement DELIVERY SERVICES [MCDANIEL: SB23.6691]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8007
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 14.00	
Purpose of Disbursement DELIVERY SERVICES [GREEN MONSTER: SB23.7034]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8006
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 235.39	
Purpose of Disbursement DELIVERY SERVICES [MCDANIEL: SB23.6692]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7985
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 18.70	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7986
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 14.00	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7987
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 173.51	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7988
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 30.49	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7989
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 16.12	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7990
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 20.27	
Purpose of Disbursement DELIVERY SERVICE [AMEX: SB23.6877]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7991
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 71.19	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7992
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 31.52	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7993
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 38.63	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7994
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 42.64	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7995
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 45.96	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7996
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 10.54	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7997
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 14.90	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7998
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 105.82	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.7999
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 38.56	
Purpose of Disbursement DELIVERY SERVICES [AMEX: SB23.6878]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8001
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 70.56	
Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6646]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8002
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 25.44	
Purpose of Disbursement PRINTING AND DESIGN SERVICES [LAUDNER: SB23.6647]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8003
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 0.00 107.96	
Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6647]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8004
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 0.00 334.56	
Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6647]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8009
City MEMPHIS State TN Zip Code 38120	Amount of Each Disbursement this Period 0.00 177.34	
Purpose of Disbursement DELIVERY SERVICE [CHMIELEWSKI: SB23.6754]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8010
City MEMPHIS	State TN	
Zip Code 38120	Purpose of Disbursement DELIVERY SERVICE [KELLER: SB23.6806]	Amount of Each Disbursement this Period 809.27
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX OFFICE		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8014
City MEMPHIS	State TN	
Zip Code 38120	Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6643]	Amount of Each Disbursement this Period 372.34
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX OFFICE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8012
City MEMPHIS	State TN	
Zip Code 38120	Purpose of Disbursement DELIVERY SERVICES [HUPKE: SB23.6640]	Amount of Each Disbursement this Period 20.70
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. FEDEX OFFICE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8013
City MEMPHIS	State TN	
Purpose of Disbursement DELIVERY SERVICES [HUPKE: SB23.6640]		Amount of Each Disbursement this Period 38.52
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. FLAG-WORKS OVER AMERICA		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 16 KENNEDY AVENUE		Transaction ID : SB23.8018
City CONCORD	State NH	
Purpose of Disbursement CAMPAIGN PROMOTIONAL ITEMS: FLAGS [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 2006.25
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. FLAG-WORKS OVER AMERICA		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 16 KENNEDY AVENUE		Transaction ID : SB23.8019
City CONCORD	State NH	
Purpose of Disbursement CAMPAIGN PROMOTIONAL ITEMS: FLAGS [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 399.90
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MICHAEL FLYNN		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 63 TUCKERMAN AVENUE		Transaction ID : SB23.6686
City MIDDLETOWN State RI Zip Code 02842	Amount of Each Disbursement this Period 2361.22	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. FREEDOM FORCE, LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO BOX 66483 1505 CONNECTICUT AVENUE, NW		Transaction ID : SB23.7007
City WASHINGTON State DC Zip Code 20035	Amount of Each Disbursement this Period 6500.00	
Purpose of Disbursement VIDEO PRODUCTION SERVICES	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KATSUMI FUNAHASHI		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 3426 IRWIN AVENUE		Transaction ID : SB23.6748
City BRONX State NY Zip Code 10463	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement VIDEO PRODUCTION SERVICES	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Subtotal Of Receipts This Page (optional)..... 9311.22

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GAUCHOS CAFE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 62 LOWELL STREET		Transaction ID : SB23.8050
City MANCHESTER	State NH	
Purpose of Disbursement MEETING EXPENSE: MEALS [WHITEHOUSE: SB23.6744]		Amount of Each Disbursement this Period 96.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. GAUCHOS CAFE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 62 LOWELL STREET		Transaction ID : SB23.8049
City MANCHESTER	State NH	
Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 40.43
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. GEECHEE COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 2401 DANIEL ISLAND DRIVE		Transaction ID : SB23.7008
City CHARLESTON	State SC	
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 25000.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 25000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GEECHEE COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 2401 DANIEL ISLAND DRIVE		Transaction ID : SB23.7009
City CHARLESTON State SC Zip Code 29492	Amount of Each Disbursement this Period 1423.00	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GEECHEE COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 2401 DANIEL ISLAND DRIVE		Transaction ID : SB23.7010
City CHARLESTON State SC Zip Code 29492	Amount of Each Disbursement this Period 25000.00	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GEECHEE COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 2401 DANIEL ISLAND DRIVE		Transaction ID : SB23.7011
City CHARLESTON State SC Zip Code 29492	Amount of Each Disbursement this Period 25000.00	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 51423.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GEECHEE COMMUNICATIONS, LLC		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 2401 DANIEL ISLAND DRIVE		Transaction ID : SB23.7012
City CHARLESTON State SC Zip Code 29492	Amount of Each Disbursement this Period 1768.48	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GEORGE DAILY AUDITORIUM		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1800 N. THIRD STREET		Transaction ID : SB23.7014
City OSKALOOSA State IA Zip Code 52577	Amount of Each Disbursement this Period 1296.70	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ANDREW GEORGEVITS		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 481 MOUNTAIN RD.		Transaction ID : SB23.6612
City CONCORD State NH Zip Code 03301	Amount of Each Disbursement this Period 5250.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 8315.18

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7015
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period \$ 279.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7016
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period \$ 3133.71
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7017
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period \$ 878.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... \$ 4291.61

Total This Period (last page this line number only).....

**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7018
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period 259.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7019
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period 356.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GILES-PARSCALE		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 321 6TH STREET		Transaction ID : SB23.7020
City SAN ANTONIO	State TX	
Purpose of Disbursement WEBSITE DEVELOPMENT	Candidate Name	Amount of Each Disbursement this Period 273.44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 889.04

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TANA GOERTZ		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 9374 KINGMAN DRIVE		Transaction ID : SB23.6840
City WEST DES MOINES	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 16.42
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. TANA GOERTZ		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 9374 KINGMAN DRIVE		Transaction ID : SB23.6841
City WEST DES MOINES	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 57.17
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. TANA GOERTZ		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 9374 KINGMAN DRIVE		Transaction ID : SB23.6842
City WEST DES MOINES	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 63.93
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 137.52

Total This Period (last page this line number only).....

**SCHEDULE B-P
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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TANA GOERTZ		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 9374 KINGMAN DRIVE		Transaction ID : SB23.9306
City WEST DES MOINES	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [GOERTZ: SB23.6844]	Candidate Name	Amount of Each Disbursement this Period 141.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. TANA GOERTZ		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 9374 KINGMAN DRIVE		Transaction ID : SB23.6839
City WEST DES MOINES	State IA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. GRAND HARBOR HOTEL - DUBUQUE		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 350 BELL ST		Transaction ID : SB23.8065
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7327]	Candidate Name	Amount of Each Disbursement this Period 311.18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 4000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GRAND HARBOR RESORT		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 350 BELL ST		Transaction ID : SB23.8069
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6646]		Amount of Each Disbursement this Period 307.05
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. GRAND HARBOR RESORT		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 350 BELL ST		Transaction ID : SB23.8070
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: LODGING [DECK: SB23.6660]		Amount of Each Disbursement this Period 102.35
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. GRAND HARBOR RESORT		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 350 BELL ST		Transaction ID : SB23.8071
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: LODGING [CLOVIS: SB23.6809]		Amount of Each Disbursement this Period 204.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GRAND HARBOR RESORT		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 350 BELL ST		Transaction ID : SB23.8067
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: LODGING [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 204.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. GRAND RIVER CENTER		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 500 BELL STREET		Transaction ID : SB23.7027
City DUBUQUE	State IA	
Purpose of Disbursement FACILITY RENTAL		Amount of Each Disbursement this Period 2750.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. GRAND RIVER CENTER		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 500 BELL STREET		Transaction ID : SB23.7026
City DUBUQUE	State IA	
Purpose of Disbursement EVENT STAGING EXPENSE		Amount of Each Disbursement this Period 3063.56
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 5813.56

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7030
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7033
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 6650.33	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7028
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 18.70	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 26669.03

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7029
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 7803.00	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7034
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 48.95	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7036
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 8287.05

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7031
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7032
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address PO BOX 1492		Transaction ID : SB23.7035
City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period 120.00	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 40120.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEPHANIE GRISHAM		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1314 S LARKSPUR ST.		Transaction ID : SB23.6815
City GILBERT	State AZ	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type 101	Amount of Each Disbursement this Period 479.76
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. STEPHANIE GRISHAM		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1314 S LARKSPUR ST.		Transaction ID : SB23.7460
City GILBERT	State AZ	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 2000.00
Candidate Name	Office 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:	

Full Name (Last, First, Middle Initial) C. STEPHANIE GRISHAM		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1314 S LARKSPUR ST.		Transaction ID : SB23.6816
City GILBERT	State AZ	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type 101	Amount of Each Disbursement this Period 1059.48
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 3539.24

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STEPHANIE GRISHAM		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1314 S LARKSPUR ST.		Transaction ID : SB23.7461
City GILBERT	State AZ	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 1200.00
Candidate Name	Office 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:	

Full Name (Last, First, Middle Initial) B. JOE HALLUMS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6718
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Category/ Type	Amount of Each Disbursement this Period 275.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. HAMPTON INN		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 5001 FLEUR DR		Transaction ID : SB23.8083
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6877]	Category/ Type	Amount of Each Disbursement this Period 557.76
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 1475.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HAMPTON INN		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 59 PORTSMOUTH AVE		Transaction ID : SB23.8090
City EXETER	State NH	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7326]		Amount of Each Disbursement this Period 665.58
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1729 H STREET NW		Transaction ID : SB23.8088
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL: LODGING [SCAVIANO: SB23.6649]		Amount of Each Disbursement this Period 376.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. HAMPTON INN		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 62 S ROYAL ST		Transaction ID : SB23.8092
City MOBILE	State AL	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7327]		Amount of Each Disbursement this Period 339.72
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HAMPTON INN		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 5001 FLEUR DR		Transaction ID : SB23.8084
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: LODGING [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 150.65
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 29 WILLIAM POPE DRIVE		Transaction ID : SB23.8099
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6691]		Amount of Each Disbursement this Period 166.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 29 WILLIAM POPE DRIVE		Transaction ID : SB23.8100
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6691]		Amount of Each Disbursement this Period 114.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 29 WILLIAM POPE DRIVE		Transaction ID : SB23.8101
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6692]		Amount of Each Disbursement this Period 145.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 29 WILLIAM POPE DRIVE		Transaction ID : SB23.8102
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6692]		Amount of Each Disbursement this Period 166.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 29 WILLIAM POPE DRIVE		Transaction ID : SB23.8103
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: LODGING [MCDANIEL: SB23.6692]		Amount of Each Disbursement this Period 114.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 62 SOUTH ROYAL STREET		Transaction ID : SB23.8108
City MOBILE	State AL	
Zip Code 36602	Purpose of Disbursement TRAVEL: LODGING [CHMIELEWSKI: SB23.6753]	Amount of Each Disbursement this Period 494.31
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 310 4TH AVENUE SOUTH		Transaction ID : SB23.8106
City NASHVILLE	State TN	
Zip Code 37201	Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6734]	Amount of Each Disbursement this Period 555.90
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 62 SOUTH ROYAL STREET		Transaction ID : SB23.8107
City MOBILE	State AL	
Zip Code 36602	Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6734]	Amount of Each Disbursement this Period 161.37
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HAMPTON INN & SUITES		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 310 4TH AVENUE SOUTH		Transaction ID : SB23.8096
City NASHVILLE	State TN	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6647]		Amount of Each Disbursement this Period 870.26
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. HAMPTON INN - GREENVILLE		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 171 RIVERPLACE		Transaction ID : SB23.8094
City GREENVILLE	State SC	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7327]		Amount of Each Disbursement this Period 279.02
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. HAMPTON INNS		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 310 4TH AVENUE S		Transaction ID : SB23.8110
City NASHVILLE	State TN	
Purpose of Disbursement TRAVEL: LODGING [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 599.70
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HERTZ		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 225 BRAE BLVD		Transaction ID : SB23.8118
City PARK RIDGE	State NJ	
Purpose of Disbursement TRAVEL: CAR RENTAL [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 286.99
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. KIMBERLEE HEWITT		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 1604 WRIGHT LANE		Transaction ID : SB23.6756
City VIRGINIA BEACH	State VA	
Purpose of Disbursement PHOTOGRAPHY SERVICES		Amount of Each Disbursement this Period 2400.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. KIMBERLEE HEWITT		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1604 WRIGHT LANE		Transaction ID : SB23.6757
City VIRGINIA BEACH	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 2742.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5142.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HOPE HICKS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.6699
City NEW YORK	State NY	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type	Amount of Each Disbursement this Period 3166.64
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. MICHAEL HILL		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6788
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Category/ Type	Amount of Each Disbursement this Period 250.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. HILTON		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 7930 JONES BRANCH DRIVE		Transaction ID : SB23.8130
City MCLEAN	State VA	
Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6732]	Category/ Type	Amount of Each Disbursement this Period 412.13
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 3416.64

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HILTON		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 206 EAST 52ND ST		Transaction ID : SB23.8128
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: LODGING [C&M: SB23.6896]	Zip Code 10022	Amount of Each Disbursement this Period 242.56
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 2383 COASTAL GRAND CIRCLE		Transaction ID : SB23.8141
City MYRTLE BEACH	State SC	
Purpose of Disbursement TRAVEL: LODGING [SMITH: SB23.6682]	Zip Code 29577	Amount of Each Disbursement this Period 229.88
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8132
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]	Zip Code 50014	Amount of Each Disbursement this Period 270.26
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8133
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 200.48
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8134
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 211.68
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8135
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 223.40
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8136
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 235.18
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8137
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 211.68
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8138
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 267.68
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 1325 DICKINSON AVE		Transaction ID : SB23.8139
City AMES	State IA	
Purpose of Disbursement TRAVEL: LODGING [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 0.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 2707 LITTLE ROCK RD		Transaction ID : SB23.8147
City CHARLOTTE	State NC	
Purpose of Disbursement TRAVEL: LODGING [SCAVIANO: SB23.6649]		Amount of Each Disbursement this Period 0.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 2280 BROWN AVE		Transaction ID : SB23.8151
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7327]		Amount of Each Disbursement this Period 0.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 3 RAVINIA DR SUITE 1000		Transaction ID : SB23.8149
City ATLANTA	State GA Zip Code 30346	
Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6734]		Amount of Each Disbursement this Period 368.42
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. HOLIDAY INN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 35 BLUFFTON ROAD		Transaction ID : SB23.8157
City BLUFFTON	State SC Zip Code 29910	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7324]		Amount of Each Disbursement this Period 565.40
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2508 BOS LANDEN DRIVE		Transaction ID : SB23.8158
City PELLA	State IA Zip Code 50219	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7324]		Amount of Each Disbursement this Period 470.36
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HOLIDAY INN EXPRESS		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 2508 BOS LANDEN DRIVE		Transaction ID : SB23.8155
City PELLA	State IA	
Purpose of Disbursement TRAVEL: LODGING [HEWITT: SB23.6757]		Amount of Each Disbursement this Period 235.18
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. HOLIDAY INN EXPRESS		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 12150 DIXIE HWY		Transaction ID : SB23.8160
City BIRCH RUN	State MI	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7326]		Amount of Each Disbursement this Period 341.73
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN MANCHESTER AIRPORT		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 2280 BROWN AVENUE		Transaction ID : SB23.8164
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7323]		Amount of Each Disbursement this Period 379.32
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HOME DEPOT		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 42 D'AMANTE DRIVE		Transaction ID : SB23.7040
City CONCORD	State NH	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 785.94
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. HOME DEPOT		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 2455 PACES FERRY RD SE #B #3		Transaction ID : SB23.8172
City ATLANTA	State GA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]	Candidate Name	Amount of Each Disbursement this Period 125.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. HOME DEPOT		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 2455 PACES FERRY RD SE #B #3		Transaction ID : SB23.8173
City ATLANTA	State GA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]	Candidate Name	Amount of Each Disbursement this Period 14.91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 785.94

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. JOHN HULSIZER

Full Name (Last, First, Middle Initial)

Mailing Address 17262 S JOHN DEERE RD #6

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2015

Transaction ID : SB23.6723

Amount of Each Disbursement this Period: 856.18

Category/Type: 101

B. JOHN HULSIZER

Full Name (Last, First, Middle Initial)

Mailing Address 17262 S JOHN DEERE RD #6

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement FIELD CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2015

Transaction ID : SB23.7451

Amount of Each Disbursement this Period: 1750.00

Category/Type: 101

C. JOHN HULSIZER JR

Full Name (Last, First, Middle Initial)

Mailing Address 17262 S JOHN DEERE RD #6

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement TRAVEL: MILEAGE [HULSIZER: SB23.6723]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2015

Transaction ID : SB23.9289

Amount of Each Disbursement this Period: 856.18

Category/Type: [MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2606.18

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOHN HULSIZER		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.6724
City DUBUQUE	State IA Zip Code 52001	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	Amount of Each Disbursement this Period 1591.60
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN HULSIZER		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.7452
City DUBUQUE	State IA Zip Code 52001	
Purpose of Disbursement FIELD CONSULTING	Category/Type 101	Amount of Each Disbursement this Period 3500.00
Candidate Name	Office 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:		

Full Name (Last, First, Middle Initial) C. JOHN HULSIZER JR		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.9290
City DUBUQUE	State IA Zip Code 52001	
Purpose of Disbursement TRAVEL: MILEAGE [HULSIZER: SB23.6724]	Category/Type	Amount of Each Disbursement this Period 1591.60
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 5091.60

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOHN HULSIZER		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.6722
City DUBUQUE	State IA	
Purpose of Disbursement FIELD CONSULTING	Category/ Type	Amount of Each Disbursement this Period 3500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN HULSIZER		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.6725
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/ Type	Amount of Each Disbursement this Period 2662.18
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN HULSIZER JR		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 17262 S JOHN DEERE RD #6		Transaction ID : SB23.9291
City DUBUQUE	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [HULSIZER: SB23.6725]	Category/ Type	Amount of Each Disbursement this Period 1938.90
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6162.18

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6636
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6639
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 3139.50	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.9271
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 3139.50	
Purpose of Disbursement TRAVEL: MILEAGE [HUPKE: SB23.6639]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 7139.50

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6637
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6640
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 3103.68	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.9272
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 2128.08	
Purpose of Disbursement TRAVEL: MILEAGE [HUPKE: SB23.6640]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 7103.68

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6638
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.6641
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 2543.80	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHRIS HUPKE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address PO BOX 313		Transaction ID : SB23.9273
City LARCHWOOD State IA Zip Code 51241	Amount of Each Disbursement this Period 2543.80	
Purpose of Disbursement TRAVEL: MILEAGE [HUPKE: SB23.6641]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6543.80

Total This Period (last page this line number only).....

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ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HY-VEE		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 5820 WESTOWN PKWY		Transaction ID : SB23.8182
City WEST DES MOINES	State IA	
Purpose of Disbursement EVENT EXPENSE: WATER [NAGEL: SB23.6630]	Candidate Name	Amount of Each Disbursement this Period 133.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. HY-VEE		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 5820 WESTOWN PKWY		Transaction ID : SB23.8183
City WEST DES MOINES	State IA	
Purpose of Disbursement EVENT EXPENSE: WATER [NAGEL: SB23.6630]	Candidate Name	Amount of Each Disbursement this Period 125.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. HY-VEE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 5820 WESTOWN PKWY		Transaction ID : SB23.8184
City WEST DES MOINES	State IA	
Purpose of Disbursement EVENT EXPENSE: ICE [HUPKE: SB23.6640]	Candidate Name	Amount of Each Disbursement this Period 7.98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HY-VEE		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 5820 WESTOWN PKWY		Transaction ID : SB23.8185
City WEST DES MOINES	State IA	
Purpose of Disbursement EVENT EXPENSE: ICE [HUPKE: SB23.6640]	Zip Code 50266	Amount of Each Disbursement this Period 19.95
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. IKEA		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1 BEARD STREET		Transaction ID : SB23.8193
City BROOKLYN	State NY	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6779]	Zip Code 11231	Amount of Each Disbursement this Period 819.90
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. INTERCONTINENTAL HOTEL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 9801 CARNEGIE AVENUE		Transaction ID : SB23.8199
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7325]	Zip Code 44106	Amount of Each Disbursement this Period 453.19
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. INTERCONTINENTAL HOTEL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 9801 CARNEGIE AVENUE		Transaction ID : SB23.8200
City CLEVELAND State OH Zip Code 44106	Amount of Each Disbursement this Period 13.00	
Purpose of Disbursement TRAVEL: MEALS [TELION: SB23.7325]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. INTERCONTINENTAL HOTEL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 9801 CARNEGIE AVENUE		Transaction ID : SB23.8201
City CLEVELAND State OH Zip Code 44106	Amount of Each Disbursement this Period 647.22	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7325]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. INTERCONTINENTAL HOTEL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 9801 CARNEGIE AVENUE		Transaction ID : SB23.8202
City CLEVELAND State OH Zip Code 44106	Amount of Each Disbursement this Period 677.99	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7325]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8207
City DES MOINES	State IA	
Zip Code 50317	Purpose of Disbursement EVENT ENTRY FEE [LAUDNER: SB23.6646]	Amount of Each Disbursement this Period 80.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8208
City DES MOINES	State IA	
Zip Code 50317	Purpose of Disbursement EVENT ENTRY FEE [LAUDNER: SB23.6646]	Amount of Each Disbursement this Period 220.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8210
City DES MOINES	State IA	
Zip Code 50317	Purpose of Disbursement PARKING SERVICES [ELCOCK: SB23.6763]	Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8211
City DES MOINES	State IA	
Purpose of Disbursement PARKING SERVICES [ELCOCK: SB23.6763]	Zip Code 50317	Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8209
City DES MOINES	State IA	
Purpose of Disbursement EVENT ENTRY FEE [HULSIZER: SB23.6725]	Zip Code 50317	Amount of Each Disbursement this Period 43.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. IOWA STATE FAIR		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 3000 E GRAND AVE		Transaction ID : SB23.8212
City DES MOINES	State IA	
Purpose of Disbursement EVENT ENTRY FEE [KELLER: SB23.6806]	Zip Code 50317	Amount of Each Disbursement this Period 61.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....→ 0.00

Total This Period (last page this line number only).....→

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. IOWA STATE FAIR

Full Name (Last, First, Middle Initial)
Mailing Address 3000 E GRAND AVE

City DES MOINES State IA Zip Code 50317

Purpose of Disbursement
PARKING SERVICES [KELLER: SB23.6806]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB23.8213

Amount of Each Disbursement this Period
72.00

[MEMO ITEM]

B. JBC RESEARCH, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 1200 18TH ST. 8TH FLOOR

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
POLICY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 26 / 2015

Transaction ID : SB23.7042

Amount of Each Disbursement this Period
7500.00

C. JETBLUE

Full Name (Last, First, Middle Initial)
Mailing Address 27-01 QUEENS PLAZA N

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL: AIR [GREEN MONSTER: SB23.7033]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 14 / 2015

Transaction ID : SB23.8219

Amount of Each Disbursement this Period
220.10

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 7500.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JETBLUE		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 27-01 QUEENS PLAZA N		Transaction ID : SB23.8218
City LONG ISLAND CITY	State NY	
Purpose of Disbursement TRAVEL: AIR [SCAVIANO: SB23.6649]		Amount of Each Disbursement this Period 215.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. JET BLUE		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 21-07 QUEENS PLAZA N		Transaction ID : SB23.8215
City LONG ISLAND CITY	State NY	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 219.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. JET BLUE		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 21-07 QUEENS PLAZA N		Transaction ID : SB23.8216
City LONG ISLAND CITY	State NY	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 35.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JET BLUE		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 21-07 QUEENS PLAZA N		Transaction ID : SB23.8217
City LONG ISLAND CITY	State NY	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 219.10
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. JH SPECIALTY INC.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address PO BOX 15370		Transaction ID : SB23.7044
City FORT WAYNE	State IN	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Amount of Each Disbursement this Period 688.69
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. JONES DAY		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		Transaction ID : SB23.7045
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING		Amount of Each Disbursement this Period 42295.72
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 42984.41

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JONES DAY		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		Transaction ID : SB23.7046
City WASHINGTON	State DC	
Zip Code 20044	Purpose of Disbursement LEGAL CONSULTING	Amount of Each Disbursement this Period 37123.09
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. JONES DAY		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		Transaction ID : SB23.7047
City WASHINGTON	State DC	
Zip Code 20044	Purpose of Disbursement LEGAL CONSULTING	Amount of Each Disbursement this Period 81518.03
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. TIMOTHY JOST		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address C/O RED CURVE SOLUTIONS 500 CUMMINGS CENTER, SUITE 4400		Transaction ID : SB23.6849
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 191.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 118832.12

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RON JURIAN		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6800
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 133.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RON JURIAN		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6801
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 78.41
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RON JURIAN		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6802
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 39.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 250.41

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JORDAN KAREM		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 7230 EAST LOMA LANE		Transaction ID : SB23.6741
City SCOTTSDALE	State AZ	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 371.67
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JORDAN KAREM		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 7230 EAST LOMA LANE		Transaction ID : SB23.7453
City SCOTTSDALE	State AZ	
Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 2000.00
Candidate Name	Category/ Type	
Office 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:		

Full Name (Last, First, Middle Initial) C. JORDAN KAREM		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 7230 EAST LOMA LANE		Transaction ID : SB23.9292
City SCOTTSDALE	State AZ	
Purpose of Disbursement TRAVEL: MILEAGE [KAREM: SB23.6741]	<input type="checkbox"/>	Amount of Each Disbursement this Period 25.36
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2371.67

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JORDAN KAREM		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 7230 EAST LOMA LANE		Transaction ID : SB23.6742
City SCOTTSDALE	State AZ	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 1633.01
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JORDAN KAREM		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 7230 EAST LOMA LANE		Transaction ID : SB23.7454
City SCOTTSDALE	State AZ	
Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	
Office 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:		

Full Name (Last, First, Middle Initial) C. ROBERT KASCHL		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6798
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	<input type="checkbox"/>	Amount of Each Disbursement this Period 395.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... **3028.01**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. KEENE SCHOOL DISTRICT		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 77 ARCH STREET		Transaction ID : SB23.7049
City KEENE	State NH	
Zip Code 03431	Purpose of Disbursement FACILITY RENTAL	Amount of Each Disbursement this Period 4111.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RYAN KELLER		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.6805
City DES MOINES	State IA	
Zip Code 50313	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 1709.55
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RYAN KELLER		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.9302
City DES MOINES	State IA	
Zip Code 50313	Purpose of Disbursement TRAVEL: MILEAGE [KELLER: SB23.6805]	Amount of Each Disbursement this Period 1570.25
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5820.55

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RYAN KELLER		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.6806
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 2938.03
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. RYAN KELLER		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 902 EUCLID AVENUE		Transaction ID : SB23.9303
City DES MOINES	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [KELLER: SB23.6806]		Amount of Each Disbursement this Period 455.53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. KINKOS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 942 SOUTH SHADY GROVE ROAD		Transaction ID : SB23.8234
City MEMPHIS	State TN	
Purpose of Disbursement PRINTING AND DESIGN SERVICES [MCENTEE: SB23.6728]		Amount of Each Disbursement this Period 239.09
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2938.03

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. KLC VIDEO PRODUCTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 1742 SAM RITTENBERG BLVD. UNIT 8-I

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2015

Transaction ID : SB23.7051

Amount of Each Disbursement this Period: 850.00

Category/Type

B. LAGUARDIA AIRPORT

Full Name (Last, First, Middle Initial)
Mailing Address LAGUARDIA AIRPORT

City FLUSHING State NY Zip Code 11371

Purpose of Disbursement PARKING SERVICES [UHER: SB23.6673]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2015

Transaction ID : SB23.8265

Amount of Each Disbursement this Period: 195.00

Category/Type

[MEMO ITEM]

C. LAGUARDIA AIRPORT

Full Name (Last, First, Middle Initial)
Mailing Address LAGUARDIA AIRPORT

City FLUSHING State NY Zip Code 11371

Purpose of Disbursement PARKING SERVICES [JURIAN: SB23.6801]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2015

Transaction ID : SB23.8272

Amount of Each Disbursement this Period: 39.00

Category/Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 850.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8273
City FLUSHING	State NY	
Zip Code 11371	Purpose of Disbursement PARKING SERVICES [JURIAN: SB23.6802]	Amount of Each Disbursement this Period 39.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8277
City FLUSHING	State NY	
Zip Code 11371	Purpose of Disbursement PARKING SERVICES [DECK: SB23.7393]	Amount of Each Disbursement this Period 78.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8274
City FLUSHING	State NY	
Zip Code 11371	Purpose of Disbursement TRAVEL: FOOD [TELION: SB23.7326]	Amount of Each Disbursement this Period 7.24
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8275
City FLUSHING	State NY	
Purpose of Disbursement TRAVEL: FOOD [TELION: SB23.7326]		Amount of Each Disbursement this Period 22.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8276
City FLUSHING	State NY	
Purpose of Disbursement TRAVEL: FOOD [TELION: SB23.7326]		Amount of Each Disbursement this Period 16.07
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8266
City FLUSHING	State NY	
Purpose of Disbursement PARKING SERVICES [UHER: SB23.6674]		Amount of Each Disbursement this Period 78.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8267
City FLUSHING	State NY	
Purpose of Disbursement PARKING SERVICES [UHER: SB23.6674]		Amount of Each Disbursement this Period 39.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8268
City FLUSHING	State NY	
Purpose of Disbursement PARKING SERVICES [UHER: SB23.6675]		Amount of Each Disbursement this Period 39.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. LAGUARDIA AIRPORT		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address LAGUARDIA AIRPORT		Transaction ID : SB23.8264
City FLUSHING	State NY	
Purpose of Disbursement TRAVEL: MEALS [C&M: SB23.6896]		Amount of Each Disbursement this Period 15.91
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6642
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 2502.37
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9274
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6642]		Amount of Each Disbursement this Period 1220.17
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6643
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 1756.42
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4258.79

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9275
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6643]		Amount of Each Disbursement this Period 742.91
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6644
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 3867.54
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9276
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 858.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 3867.54

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6645
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 4089.54
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9277
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6645]		Amount of Each Disbursement this Period 961.31
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6646
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 3228.16
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 7317.70

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9278
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6646]		Amount of Each Disbursement this Period 1185.47
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.6647
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 4452.11
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CHUCK LAUDNER		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.9279
City ROCKFORD	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [LAUDNER: SB23.6647]		Amount of Each Disbursement this Period 985.74
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4452.11

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. LONG ISLAND RAIL ROAD

Full Name (Last, First, Middle Initial)

Mailing Address JAMAICA RAILROAD STATION

City JAMAICA State NY Zip Code 11435

Purpose of Disbursement TRAVEL: RAIL [TSAVERAS: SB23.6848] Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 08 / 28 / 2015

Transaction ID : SB23.8307

Amount of Each Disbursement this Period: 31.50

[MEMO ITEM]

B. RICK LOPEZ

Full Name (Last, First, Middle Initial)

Mailing Address 20118 N. 67TH AVE 300-443

City GLENDALE State AZ Zip Code 85308

Purpose of Disbursement SECURITY SERVICES Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 07 / 14 / 2015

Transaction ID : SB23.6796

Amount of Each Disbursement this Period: 350.00

C. JARED LOWE

Full Name (Last, First, Middle Initial)

Mailing Address 20118 N. 67TH AVE 300-443

City GLENDALE State AZ Zip Code 85308

Purpose of Disbursement SECURITY SERVICES Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 07 / 14 / 2015

Transaction ID : SB23.6711

Amount of Each Disbursement this Period: 275.00

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DARIN LUND		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2310 W. LONG SHADOW TRAIL		Transaction ID : SB23.6651
City PHOENIX	State AZ	
Purpose of Disbursement SECURITY SERVICES	Zip Code 85085	Amount of Each Disbursement this Period 385.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CHAD LUTZ		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6633
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Zip Code 85308	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. LUXE HOTEL		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 11461 SUNSET BLVD		Transaction ID : SB23.8321
City LOS ANGELES	State CA	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6644]	Zip Code 90049	Amount of Each Disbursement this Period 668.45
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 635.00

Total This Period (last page this line number only)..... 635.00

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. LISA MACIEJOWSKI GAMBUZZA		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 14 ORION ROAD		Transaction ID : SB23.7457
City PEPPERELL	State MA	
Purpose of Disbursement FIELD CONSULTING	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/ Type	
Office 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:		

Full Name (Last, First, Middle Initial) B. LISA MACIEJOWSKI GAMBUZZA		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 14 ORION ROAD		Transaction ID : SB23.9297
City PEPPERELL	State MA	
Purpose of Disbursement TRAVEL: MILEAGE [MACIEJOWSKI GAMBUZZA: SB23.6759]	<input type="checkbox"/>	Amount of Each Disbursement this Period 53.47
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. DON MALONEY		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6655
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	<input type="checkbox"/>	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2750.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 127 PUBLIC SQ		Transaction ID : SB23.8331
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 766.58
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 127 PUBLIC SQ		Transaction ID : SB23.8332
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]		Amount of Each Disbursement this Period 833.01
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 10400 FERNWOOD RD		Transaction ID : SB23.8334
City BETHESDA	State MD	
Purpose of Disbursement TRAVEL: LODGING [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 232.56
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SCOTT MASINO			Date of Disbursement MM / DD / YYYY 07 / 28 / 2015	
Mailing Address 2310 W. LONG SHADOW TRAIL			Transaction ID : SB23.6813	
City PHOENIX	State AZ	Zip Code 85085	Amount of Each Disbursement this Period 1,000.00 350.00	
Purpose of Disbursement SECURITY SERVICES	Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) B. MAXIM ADVERTISING, INC.			Date of Disbursement MM / DD / YYYY 07 / 06 / 2015	
Mailing Address PO BOX 398			Transaction ID : SB23.7053	
City NEWTON	State IA	Zip Code 50208	Amount of Each Disbursement this Period 12,962.31	
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE	Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) C. MAXIM ADVERTISING, INC.			Date of Disbursement MM / DD / YYYY 07 / 22 / 2015	
Mailing Address PO BOX 398			Transaction ID : SB23.7054	
City NEWTON	State IA	Zip Code 50208	Amount of Each Disbursement this Period 703.43	
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE	Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Subtotal Of Receipts This Page (optional)..... 14015.74

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. MAXIM ADVERTISING, INC.

Mailing Address PO BOX 398

City **NEWTON** State **IA** Zip Code **50208**

Purpose of Disbursement
DIRECT MAIL: PRINTING AND POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: _____ District: _____

Date of Disbursement
 / /

Transaction ID : SB23.7055

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)
B. STEVEN MCCLELLAN

Mailing Address 20118 N. 67TH AVE 300-443

City **GLENDALE** State **AZ** Zip Code **85308**

Purpose of Disbursement
SECURITY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: _____ District: _____

Date of Disbursement
 / /

Transaction ID : SB23.6827

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)
C. GERRI MCDANIEL

Mailing Address 1706 27TH AVE. NORTH

City **NORTH MYRTLE BEACH** State **SC** Zip Code **29582**

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: _____ District: _____

Date of Disbursement
 / /

Transaction ID : SB23.6689

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GERRI MCDANIEL		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1706 27TH AVE. NORTH		Transaction ID : SB23.6691
City NORTH MYRTLE BEACH State SC Zip Code 29582	Amount of Each Disbursement this Period 943.55	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. GERRI MCDANIEL		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 1706 27TH AVE. NORTH		Transaction ID : SB23.6692
City NORTH MYRTLE BEACH State SC Zip Code 29582	Amount of Each Disbursement this Period 943.55	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. GERRI MCDANIEL		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 1706 27TH AVE. NORTH		Transaction ID : SB23.6690
City NORTH MYRTLE BEACH State SC Zip Code 29582	Amount of Each Disbursement this Period 4056.45	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 5943.55

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GERRI MCDANIEL		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1706 27TH AVE. NORTH		Transaction ID : SB23.6693
City NORTH MYRTLE BEACH	State SC	
Zip Code 29582	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 912.80
Candidate Name	Category/Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GERRI MCDANIEL		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1706 27TH AVE. NORTH		Transaction ID : SB23.7448
City NORTH MYRTLE BEACH	State SC	
Zip Code 29582	Purpose of Disbursement FIELD CONSULTING	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/Type 101	
Office 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:		

Full Name (Last, First, Middle Initial) C. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6728
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 307.77
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6220.57

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6729
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 402.10
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6730
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 463.56
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6731
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 670.46
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 1536.12

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6732
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 1201.58
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6733
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 1034.06
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6727
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5235.64

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOHN MCENTEE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 250 MULBERRY ST #1		Transaction ID : SB23.6734
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 2312.59
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MCMULLEN PUBLIC AFFAIRS, LLC		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 4 CEDARWOOD LANE		Transaction ID : SB23.7057
City COLUMBIA	State SC	
Zip Code 29205	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 3549.23
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MEADOWS PRODUCTIONS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3883 TURTLE CREEK BLVD. SUITE 1509		Transaction ID : SB23.7059
City DALLAS	State TX	
Zip Code 75219	Purpose of Disbursement EVENT STAGING CONSULTING	Amount of Each Disbursement this Period 2768.97
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 8630.79

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BERT MENTOR		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6623
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 30.80
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BERT MENTOR		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6624
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 104.44
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. METROCOM NYC INC.		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 33 EAST 33RD STREET		Transaction ID : SB23.7060
City NEW YORK	State NY	
Zip Code 10016	Purpose of Disbursement EQUIPMENT PURCHASE: RADIOS	Amount of Each Disbursement this Period 3462.23
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3597.47

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MICHAEL COLEMAN, LLC		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 624 N. MAY STREET		Transaction ID : SB23.7061
City CHICAGO	State IL	
Purpose of Disbursement DIGITAL DESIGN SERVICES	Candidate Name	Amount of Each Disbursement this Period 1250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. MICHAEL COLEMAN, LLC		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 624 N. MAY STREET		Transaction ID : SB23.7062
City CHICAGO	State IL	
Purpose of Disbursement DIGITAL DESIGN SERVICES	Candidate Name	Amount of Each Disbursement this Period 1050.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. MICROSOFT		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address ONE MICROSOFT WAY		Transaction ID : SB23.8379
City REDMOND	State WA	
Purpose of Disbursement SOFTWARE SERVICES [CHO: SB23.6702]	Candidate Name	Amount of Each Disbursement this Period 910.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 2300.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MICROSOFT		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address ONE MICROSOFT WAY		Transaction ID : SB23.8380
City REDMOND	State WA	
Purpose of Disbursement SOFTWARE [AMEX: SB23.6878]	Candidate Name	Amount of Each Disbursement this Period 7,999.99 139.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6608
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 7,999.99 547.38
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6609
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 7,999.99 161.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 708.45

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6610
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 487.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.6611
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 17.75
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. MINNEAPOLIS-SAINT PAUL INTERNATIONAL AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 4300 GLUMACK DRIVE		Transaction ID : SB23.8391
City SAINT PAUL	State MN	
Zip Code 55111	Purpose of Disbursement PARKING SERVICES [LAUDNER: SB23.6645]	Amount of Each Disbursement this Period 120.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 504.75

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MOBILE CIVIC CENTER		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 401 CIVIC CENTER DRIVE		Transaction ID : SB23.7064
City MOBILE	State AL Zip Code 36602	
Purpose of Disbursement FACILITY RENTAL	Candidate Name	Amount of Each Disbursement this Period 10601.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. MOLLOY SOUND & VIDEO CONTRACTORS		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 1200 S. MAMMOTH RD.		Transaction ID : SB23.7066
City MANCHESTER	State NH Zip Code 03109	
Purpose of Disbursement AUDIO VISUAL SERVICES	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. MOLLOY SOUND & VIDEO CONTRACTORS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1200 S. MAMMOTH RD.		Transaction ID : SB23.7067
City MANCHESTER	State NH Zip Code 03109	
Purpose of Disbursement AUDIO VISUAL SERVICES	Candidate Name	Amount of Each Disbursement this Period 4200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 15051.33

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MOLLOY SOUND & VIDEO CONTRACTORS		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1200 S. MAMMOTH RD.		Transaction ID : SB23.7068
City MANCHESTER	State NH	
Zip Code 03109	Purpose of Disbursement AUDIO VISUAL SERVICES	Amount of Each Disbursement this Period 3900.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MOLLOY SOUND & VIDEO CONTRACTORS		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 1200 S. MAMMOTH RD.		Transaction ID : SB23.7069
City MANCHESTER	State NH	
Zip Code 03109	Purpose of Disbursement AUDIO VISUAL SERVICES	Amount of Each Disbursement this Period 3100.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.6852
City WINDHAM	State NH	
Zip Code 03087	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 307.36
Candidate Name	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 7307.36

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.7468
City WINDHAM	State NH	
Purpose of Disbursement FIELD CONSULTING	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
Candidate Name	Category/ Type	
Office 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: _____		

Full Name (Last, First, Middle Initial) B. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.9309
City WINDHAM	State NH	
Purpose of Disbursement TRAVEL: MILEAGE [MONTANARO: SB23.6852]	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="258.93"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.6850
City WINDHAM	State NH	
Purpose of Disbursement FIELD CONSULTING	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.6853
City WINDHAM	State NH	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 433.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.9310
City WINDHAM	State NH	
Purpose of Disbursement TRAVEL: MILEAGE [MONTANARO: SB23.6853]	Candidate Name	Amount of Each Disbursement this Period 361.15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.6851
City WINDHAM	State NH	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 2933.04

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.6854
City WINDHAM	State NH	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 43.01
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ZACH MONTANARO		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 9 GLENWOOD RD.		Transaction ID : SB23.9311
City WINDHAM	State NH	
Purpose of Disbursement TRAVEL: MILEAGE [MONTANARO: SB23.6854]		Amount of Each Disbursement this Period 43.01
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. CHARLES MUNOZ		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 9405 S. EASTERN AVE. #2003		Transaction ID : SB23.6635
City LAS VEGAS	State NV	
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 4000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4043.01

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MUSIC EXPRESS INC.		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 1801 W. OLYMPIC BLVD.		Transaction ID : SB23.7070
City PASADENA State CA Zip Code 91199	Amount of Each Disbursement this Period 1102.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. MUSIC EXPRESS INC.		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 1801 W. OLYMPIC BLVD.		Transaction ID : SB23.7071
City PASADENA State CA Zip Code 91199	Amount of Each Disbursement this Period 4989.81	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. MUSIC EXPRESS INC.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 1801 W. OLYMPIC BLVD.		Transaction ID : SB23.7072
City PASADENA State CA Zip Code 91199	Amount of Each Disbursement this Period 2051.41	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 8143.22

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MUSIC EXPRESS INC.		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1801 W. OLYMPIC BLVD.		Transaction ID : SB23.7073
City PASADENA State CA Zip Code 91199	Amount of Each Disbursement this Period 7461.58	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6628
City CORALVILLE State IA Zip Code 52241	Amount of Each Disbursement this Period 1002.28	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1850 JEFFREY STREET		Transaction ID : SB23.9267
City IOWA CITY State IA Zip Code 52246	Amount of Each Disbursement this Period 589.38	
Purpose of Disbursement TRAVEL: MILEAGE [NAGEL: SB23.6628]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 8463.86

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6625
City CORALVILLE	State IA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6629
City CORALVILLE	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 1017.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1850 JEFFREY STREET		Transaction ID : SB23.9268
City IOWA CITY	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [NAGEL: SB23.6629]	Candidate Name	Amount of Each Disbursement this Period 466.90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Subtotal Of Receipts This Page (optional)..... → 4517.35

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6626
City CORALVILLE	State IA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6630
City CORALVILLE	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 1208.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) C. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 1850 JEFFREY STREET		Transaction ID : SB23.9269
City IOWA CITY	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [NAGEL: SB23.6630]	Candidate Name	Amount of Each Disbursement this Period 148.27
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 4708.70

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6631
City CORALVILLE	State IA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 3141.76
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) B. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1850 JEFFREY STREET		Transaction ID : SB23.9270
City IOWA CITY	State IA	
Purpose of Disbursement TRAVEL: MILEAGE [NAGEL: SB23.6631]		Amount of Each Disbursement this Period 1985.74
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. BRADLEY NAGEL		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1524 1ST AVENUE UNIT C		Transaction ID : SB23.6627
City CORALVILLE	State IA	
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 3500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Subtotal Of Receipts This Page (optional)..... 6641.76

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL BALLOT ACCESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 1111 STEEPLE RUN		Transaction ID : SB23.7075
City LAWRENCEVILLE	State GA	
Purpose of Disbursement BALLOT ACCESS CONSULTING		Amount of Each Disbursement this Period 40000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 9020 AVIATION BLVD		Transaction ID : SB23.8420
City INGLEWOOD	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [TELION: SB23.7322]		Amount of Each Disbursement this Period 245.48
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. NATIONAL CAR RENTAL		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 1 AIRPORT ROAD SUITE 170		Transaction ID : SB23.8422
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [TELION: SB23.7323]		Amount of Each Disbursement this Period 207.57
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 40000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 436 AIRWAYS AVENUE		Transaction ID : SB23.8425
City SAVANNAH State GA Zip Code 31408	Amount of Each Disbursement this Period 430.37	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [TELION: SB23.7324]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 18809 MAPLEWOOD AVENUE		Transaction ID : SB23.8427
City CLEVELAND State OH Zip Code 44135	Amount of Each Disbursement this Period 303.60	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [TELION: SB23.7325]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8431
City ST LOUIS State MO Zip Code 63105	Amount of Each Disbursement this Period 264.37	
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7326]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015	
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8432	
City ST LOUIS	State MO		Zip Code 63105
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7326]		Amount of Each Disbursement this Period 266.16	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015	
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8433	
City ST LOUIS	State MO		Zip Code 63105
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7327]		Amount of Each Disbursement this Period 261.01	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015	
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8434	
City ST LOUIS	State MO		Zip Code 63105
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7327]		Amount of Each Disbursement this Period 164.27	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8435
City ST LOUIS	State MO	
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7327]		Amount of Each Disbursement this Period 291.63
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8436
City ST LOUIS	State MO	
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7327]		Amount of Each Disbursement this Period 129.72
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 600 CORPORATE PARK DRIVE		Transaction ID : SB23.8437
City ST LOUIS	State MO	
Purpose of Disbursement TRAVEL: CAR RENTAL [TELION: SB23.7327]		Amount of Each Disbursement this Period 91.67
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ESTEBAN NAVARRETTE		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N 67TH AVE. #300-443		Transaction ID : SB23.6667
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Amount of Each Disbursement this Period \$ 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. NB GOLF CARS		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 4509 NE 14TH ST		Transaction ID : SB23.7077
City DES MOINES	State IA	
Purpose of Disbursement EQUIPMENT RENTAL	Candidate Name	Amount of Each Disbursement this Period \$ 519.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. GLENN NEVILLE		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6698
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Amount of Each Disbursement this Period \$ 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... \$ 1019.40

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NEW ENGLAND AIR		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 56 AIRPORT ROAD		Transaction ID : SB23.8441
City WESTERLY	State RI	
Zip Code 02891	Purpose of Disbursement TRAVEL: AIRFARE [FLYNN: SB23.6686]	Amount of Each Disbursement this Period 1713.34
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KARL NEWMAN		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 2741 TUMBLEWEED STREET		Transaction ID : SB23.6746
City ONTARIO	State CA	
Zip Code 91761	Purpose of Disbursement SECURITY SERVICES	Amount of Each Disbursement this Period 240.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MATTHEW NEWMAN		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 12 HILLTOP RD.		Transaction ID : SB23.6768
City SHORT HILLS	State NJ	
Zip Code 07078	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Amount of Each Disbursement this Period 2000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2240.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MATTHEW NEWMAN		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 12 HILLTOP RD.		Transaction ID : SB23.6769
City SHORT HILLS	State NJ	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. NEWSMAX MEDIA		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 560 VILLAGE BLVD. SUITE 120		Transaction ID : SB23.7082
City WEST PALM BEACH	State FL	
Purpose of Disbursement LIST RENTAL	Candidate Name	Amount of Each Disbursement this Period 112488.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. NEWSMAX MEDIA		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 560 VILLAGE BLVD. SUITE 120		Transaction ID : SB23.7083
City WEST PALM BEACH	State FL	
Purpose of Disbursement LIST RENTAL	Candidate Name	Amount of Each Disbursement this Period 33532.32
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 148020.49

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. NEWSMAX MEDIA

Mailing Address 560 VILLAGE BLVD. SUITE 120

City WEST PALM BEACH State FL Zip Code 33409

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		14		2015

Transaction ID : SB23.7084

Amount of Each Disbursement this Period

55053.00

Full Name (Last, First, Middle Initial)

B. NEW YORK INTERNATIONAL BUILDERS CORP.

Mailing Address 6 POINT CRESCENT

City MALBA State NY Zip Code 11357

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

Transaction ID : SB23.7078

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. SAM NUNBERG

Mailing Address 535 EAST 86TH STREET

City NEW YORK State NY Zip Code 10028

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2015

Transaction ID : SB23.6811

Amount of Each Disbursement this Period

255.00

Subtotal Of Receipts This Page (optional).....

55908.00

Total This Period (last page this line number only).....

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**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SAM NUNBERG		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 535 EAST 86TH STREET		Transaction ID : SB23.7459
City NEW YORK	State NY	
Zip Code 10028	Purpose of Disbursement COMMUNICATIONS CONSULTING	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/ Type 101	
Office 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:	

Full Name (Last, First, Middle Initial) B. SAM NUNBERG		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 535 EAST 86TH STREET		Transaction ID : SB23.6810
City NEW YORK	State NY	
Zip Code 10028	Purpose of Disbursement COMMUNICATIONS CONSULTING	Amount of Each Disbursement this Period 15645.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8489
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]	Amount of Each Disbursement this Period 43.61
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 25645.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8490
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 9.96
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8491
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 33.36
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8492
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 63.36
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8501
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [JURIAN: SB23.6801]	Amount of Each Disbursement this Period 39.41
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8456
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 33.35
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8457
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 45.41
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8458
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 53.21
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8459
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Amount of Each Disbursement this Period 30.96
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8494
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [HEWITT: SB23.6757]	Amount of Each Disbursement this Period 12.25
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8495
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [HEWITT: SB23.6757]	Amount of Each Disbursement this Period 44.58
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8481
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [LAUDNER: SB23.6645]	Amount of Each Disbursement this Period 51.50
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8482
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCAVIANO: SB23.6649]	Amount of Each Disbursement this Period 55.34
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8499
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6784]		Amount of Each Disbursement this Period 6.36
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8500
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6784]		Amount of Each Disbursement this Period 10.80
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8460
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 35.15
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8461
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 11.16
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8462
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 70.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8463
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 34.55
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8464
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]	Amount of Each Disbursement this Period 69.99
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8493
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCHILLER: SB23.6749]	Amount of Each Disbursement this Period 40.84
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8465
City NEW YORK	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]	Amount of Each Disbursement this Period 35.75
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. NYC TAXI

Full Name (Last, First, Middle Initial)
Mailing Address 33 BEAVER ST

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2015

Transaction ID : SB23.8466

Amount of Each Disbursement this Period: 34.12

[MEMO ITEM]

B. NYC TAXI

Full Name (Last, First, Middle Initial)
Mailing Address 33 BEAVER ST

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2015

Transaction ID : SB23.8467

Amount of Each Disbursement this Period: 44.79

[MEMO ITEM]

C. NYC TAXI

Full Name (Last, First, Middle Initial)
Mailing Address 33 BEAVER ST

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2015

Transaction ID : SB23.8468

Amount of Each Disbursement this Period: 85.61

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8469
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 31.56
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8470
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 37.55
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8471
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 11.15
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8472
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 11.16
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8473
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 42.41
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8474
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 43.01
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8475
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 39.95
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8476
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 47.81
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8477
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 46.61
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8478
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 36.88
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8479
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 27.24
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 33 BEAVER ST		Transaction ID : SB23.8480
City NEW YORK	State NY	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [C&M: SB23.6896]		Amount of Each Disbursement this Period 45.39
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015	
Mailing Address 6600 N MILITARY TRL		Transaction ID : SB23.8521	
City BOCA RATON	State FL		Zip Code 33496
Purpose of Disbursement OFFICE SUPPLIES [MCMULLEN: SB23.7057]		Amount of Each Disbursement this Period 1443.96	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) B. OKATIE ALE HOUSE		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015	
Mailing Address 25 WILLIAM POPE DRIVE		Transaction ID : SB23.8529	
City BLUFFTON	State SC		Zip Code 29909
Purpose of Disbursement TRAVEL: MEALS [SMITH: SB23.6681]		Amount of Each Disbursement this Period 37.00	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) C. OKATIE ALE HOUSE		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015	
Mailing Address 25 WILLIAM POPE DRIVE		Transaction ID : SB23.8539	
City BLUFFTON	State SC		Zip Code 29909
Purpose of Disbursement TRAVEL: MEALS [EPLEY: SB23.6707]		Amount of Each Disbursement this Period 60.97	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/ Type		

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. OKATIE ALE HOUSE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 25 WILLIAM POPE DRIVE		Transaction ID : SB23.8536
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: MEALS [MCDANIEL: SB23.6693]		Amount of Each Disbursement this Period 9.30
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. OKATIE ALE HOUSE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 25 WILLIAM POPE DRIVE		Transaction ID : SB23.8537
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: MEALS [MCDANIEL: SB23.6693]		Amount of Each Disbursement this Period 14.81
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. OKATIE ALE HOUSE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 25 WILLIAM POPE DRIVE		Transaction ID : SB23.8538
City BLUFFTON	State SC	
Purpose of Disbursement TRAVEL: MEALS [MCDANIEL: SB23.6693]		Amount of Each Disbursement this Period 14.81
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ORBITZ WORLDWIDE, INC.		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 500 W. MADISON SUITE 1000		Transaction ID : SB23.8542
City CHICAGO State IL Zip Code 60661	Amount of Each Disbursement this Period 231.85	
Purpose of Disbursement TRAVEL: LODGING [HEWITT: SB23.6757]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. ORBITZ WORLDWIDE, INC.		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 500 W. MADISON SUITE 1000		Transaction ID : SB23.8541
City CHICAGO State IL Zip Code 60661	Amount of Each Disbursement this Period 344.09	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6645]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. OSKALOOSA COMMUNITY SCHOOL DISTRICT		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1800 NORTH 3RD STREET		Transaction ID : SB23.7086
City OSKALOOSA State IA Zip Code 52577	Amount of Each Disbursement this Period 800.00	
Purpose of Disbursement FACILITY RENTAL	Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 800.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. OSKALOOSA HY-VEE	Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 110 S. D ST.	Transaction ID : SB23.7088 Amount of Each Disbursement this Period 10731.73
City OSKALOOSA State IA Zip Code 52577	
Purpose of Disbursement CATERING SERVICES	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) B. PALM BEACH INTERNATIONAL AIRPORT	Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1000 JAMES L TURNAGE BLVD	Transaction ID : SB23.8553 Amount of Each Disbursement this Period 169.00 [MEMO ITEM]
City WEST PALM BEACH State FL Zip Code 33415	
Purpose of Disbursement PARKING SERVICES [TELION: SB23.7326]	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) C. PASEO REAL	Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 2335 ENDEAVOR DR.	Transaction ID : SB23.7090 Amount of Each Disbursement this Period 5311.88
City LAREDO State TX Zip Code 78041	
Purpose of Disbursement FACILITY RENTAL	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Subtotal Of Receipts This Page (optional).....→ 16043.61

Total This Period (last page this line number only).....→

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PASSCODE CREATIVE, LLC		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 227 THIRD AVENUE NORTH		Transaction ID : SB23.7092
City FRANKLIN	State TN	
Purpose of Disbursement VIDEO PRODUCTION SERVICES		Amount of Each Disbursement this Period 4000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PATRICK HICKEY		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 25 E 1ST ST		Transaction ID : SB23.8575
City DES MOINES	State IA	
Purpose of Disbursement SECURITY SERVICES [KELLER: SB23.6806]		Amount of Each Disbursement this Period 480.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PATRIOT SIGNAGE, INC.		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1001 SECOND AVE.		Transaction ID : SB23.7094
City DAYTON	State KY	
Purpose of Disbursement COLLATERAL: YARD SIGNS		Amount of Each Disbursement this Period 8800.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 12800.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PATRIOT SIGNAGE, INC.		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015	
Mailing Address 1001 SECOND AVE.		Transaction ID : SB23.7096	
City DAYTON	State KY	Zip Code 41074	Amount of Each Disbursement this Period 1589.00
Purpose of Disbursement DELIVERY SERVICES	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		

Full Name (Last, First, Middle Initial) B. PATRIOT SIGNAGE, INC.		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 1001 SECOND AVE.		Transaction ID : SB23.7095	
City DAYTON	State KY	Zip Code 41074	Amount of Each Disbursement this Period 8800.00
Purpose of Disbursement COLLATERAL: YARD SIGNS	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		

Full Name (Last, First, Middle Initial) C. PELLA RENTAL AND SALES, INC.		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015	
Mailing Address 916 W. 8TH ST.		Transaction ID : SB23.7098	
City PELLA	State IA	Zip Code 50219	Amount of Each Disbursement this Period 1050.95
Purpose of Disbursement EVENT STAGING EXPENSE	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		

Subtotal Of Receipts This Page (optional)..... 11439.95

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PHOENIX CONVENTION CENTER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 100 N 3RD STREET		Transaction ID : SB23.8581
City PHOENIX	State AZ	
Purpose of Disbursement FACILITY RENTAL [AMEX: SB23.6877]		Amount of Each Disbursement this Period 7803.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. PHOENIX CONVENTION CENTER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 100 N 3RD STREET		Transaction ID : SB23.8582
City PHOENIX	State AZ	
Purpose of Disbursement FACILITY RENTAL [AMEX: SB23.6878]		Amount of Each Disbursement this Period 1010.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. PINKERTON ACADEMY		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 5 PINKERTON STREET		Transaction ID : SB23.7102
City DERRY	State NH	
Purpose of Disbursement FACILITY RENTAL		Amount of Each Disbursement this Period 6403.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 6403.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 999 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7104
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 12062.13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 10 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7105
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 2548.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7106
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 2586.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 17197.44

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1000 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7107
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 11730.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7108
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 795.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7109
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 333.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 12858.27

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7110
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 118.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7111
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 20.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7112
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 123.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 262.91

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

Primary General

Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2015

Transaction ID : SB23.7113

Amount of Each Disbursement this Period

45.45

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

Primary General

Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Transaction ID : SB23.7114

Amount of Each Disbursement this Period

24.08

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

Primary General

Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Transaction ID : SB23.7115

Amount of Each Disbursement this Period

4.27

Subtotal Of Receipts This Page (optional).....

73.80

Total This Period (last page this line number only).....

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**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7116
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period \$ 37.48
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7117
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period \$ 5.56
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7118
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period \$ 9.27
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... → \$ 52.31

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7119
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 8.23
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7120
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7121
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 66.23

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7122
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 4.08
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7123
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 16.47
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7124
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 73.89
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 94.44

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7125
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 38.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7126
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 27.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7127
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 67.59

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7128
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7129
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7130
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... **87.00**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7131
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7132
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 207.26
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7133
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 22.47
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 258.73

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7134
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7135
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 46.42
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7136
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 107.75
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 183.17

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7137
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 16.08
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7138
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 22.18
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7139
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 29.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... **67.26**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7140
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7141
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7142
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 87.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7143
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Zip Code 94105	Amount of Each Disbursement this Period \$ 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7144
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Zip Code 94105	Amount of Each Disbursement this Period \$ 1.05
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7145
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Zip Code 94105	Amount of Each Disbursement this Period \$ 2.53
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → \$ 32.58

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7146
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7147
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 7.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7148
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 38.14

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7149
City SAN FRANCISCO State CA Zip Code 94105	Amount of Each Disbursement this Period \$ 29.00	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7150
City SAN FRANCISCO State CA Zip Code 94105	Amount of Each Disbursement this Period \$ 0.42	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7151
City SAN FRANCISCO State CA Zip Code 94105	Amount of Each Disbursement this Period \$ 1.47	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → \$ 30.89

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7152
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7153
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7154
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 87.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7155
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="29.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7156
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="29.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7157
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="29.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7158
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7159
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7160
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 87.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7161
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7162
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7163
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 87.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7164
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 144 2ND ST. 1ST FLOOR		Transaction ID : SB23.7165
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 29.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6773
City TRIANGLE	State VA	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 3558.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1020 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6775
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 281.74
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6776
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 59.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6777
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 761.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 1102.77

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6778
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 128.39	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6774
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6779
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 819.90	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Subtotal Of Receipts This Page (optional)..... 4448.29

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6780
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 72.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6781
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 120.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6782
City TRIANGLE	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 186.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 379.14

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6783
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 436.01	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.6784
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 41.10	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type 101
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MEGAN POWERS		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 18300 JOHNSON ROAD		Transaction ID : SB23.7458
City TRIANGLE State VA Zip Code 22172	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type 101
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Subtotal Of Receipts This Page (optional)..... 3977.11

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. MEGAN POWERS

Full Name (Last, First, Middle Initial)
Mailing Address 18300 JOHNSON ROAD

City TRIANGLE State VA Zip Code 22172

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 03 / 2015

Transaction ID : SB23.6785

Amount of Each Disbursement this Period: 137.39

Category/Type

B. MEGAN POWERS

Full Name (Last, First, Middle Initial)
Mailing Address 18300 JOHNSON ROAD

City TRIANGLE State VA Zip Code 22172

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2015

Transaction ID : SB23.6786

Amount of Each Disbursement this Period: 8.69

Category/Type

C. PRODUCTION DESIGN ASSOCIATES, INC.

Full Name (Last, First, Middle Initial)
Mailing Address 2799 THREE LAKES ROAD

City N. CHARLESTON State SC Zip Code 29418

Purpose of Disbursement EVENT STAGING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 12 / 2015

Transaction ID : SB23.7167

Amount of Each Disbursement this Period: 4603.46

Category/Type

Subtotal Of Receipts This Page (optional)..... 4749.54

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. PRODUCTION DESIGN ASSOCIATES, INC.

Mailing Address 2799 THREE LAKES ROAD

City N. CHARLESTON State SC Zip Code 29418

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2015

Transaction ID : **SB23.7168**

Amount of Each Disbursement this Period
9,999.99
728.22

Full Name (Last, First, Middle Initial)
B. PRODUCTION DESIGN ASSOCIATES, INC.

Mailing Address 2799 THREE LAKES ROAD

City N. CHARLESTON State SC Zip Code 29418

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2015

Transaction ID : **SB23.7169**

Amount of Each Disbursement this Period
9,999.99
6987.33

Full Name (Last, First, Middle Initial)
C. PROMANIA

Mailing Address PO BOX 587

City NEWPORT State NH Zip Code 03773

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 23 / 2015

Transaction ID : **SB23.7171**

Amount of Each Disbursement this Period
9,999.99
1342.50

Subtotal Of Receipts This Page (optional)..... 9058.05

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. PRODUCTION SERVICES, LLC		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 3532 E. ELWOOD ST.		Transaction ID : SB23.7173
City PHOENIX	State AZ	
Purpose of Disbursement EVENT STAGING EXPENSE	Category/ Type	Amount of Each Disbursement this Period 15319.45
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) B. PURITAN BACKROOM		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 245 HOOKSETT ROAD		Transaction ID : SB23.8614
City MANCHESTER	State NH	
Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]	Category/ Type	Amount of Each Disbursement this Period 32.30
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. RAYMOND GARRITY		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.7175
City NEW YORK	State NY	
Purpose of Disbursement EVENT STAGING EXPENSE	Category/ Type	Amount of Each Disbursement this Period 1454.86
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 16774.31

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.7176
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 12173.99	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.7177
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 12593.04	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.7178
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 14396.55	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → 39163.58

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. RED CURVE SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB23.7179

Amount of Each Disbursement this Period: 43121.13

Category/Type

B. REGENT COACH LINE

Full Name (Last, First, Middle Initial)

Mailing Address 515 SHERMAN

City SAN ANTONIO State TX Zip Code 78202

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 02 / 2015

Transaction ID : SB23.8657

Amount of Each Disbursement this Period: 2513.70

Category/Type

[MEMO ITEM]

C. RENAISSANCE HOTELS

Full Name (Last, First, Middle Initial)

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement TRAVEL: LODGING [ASIT CONSULTING: SB23.6881]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB23.8661

Amount of Each Disbursement this Period: 355.44

Category/Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 43121.13

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RENAISSANCE MOBILE RIVERVIEW PLAZA		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 64 S WATER ST		Transaction ID : SB23.8664
City MOBILE	State AL Zip Code 36602	
Purpose of Disbursement TRAVEL: LODGING [KAREM: SB23.6742]	Category/Type	Amount of Each Disbursement this Period 509.58
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. JAMES REWALD		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 3045 S. ARCHIBALD AVE. #H-126		Transaction ID : SB23.6709
City ONTARIO	State CA Zip Code 91761	
Purpose of Disbursement SECURITY SERVICES	Category/Type	Amount of Each Disbursement this Period 240.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. RICK ERWIN'S NANTUCKET SEAFOOD		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 40 W. BROAD ST.		Transaction ID : SB23.7183
City GREENVILLE	State SC Zip Code 29601	
Purpose of Disbursement CATERING SERVICES	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 1240.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RINGCENTRAL, INC.		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 1400 FASHION ISLAND BLVD SUITE 700		Transaction ID : SB23.8669
City SAN MATEO State CA Zip Code 94404	Amount of Each Disbursement this Period 3482.61	
Purpose of Disbursement PHONE PURCHASE AND SERVICES [CHO: SB23.6703]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RINGCENTRAL, INC.		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 1400 FASHION ISLAND BLVD SUITE 700		Transaction ID : SB23.8670
City SAN MATEO State CA Zip Code 94404	Amount of Each Disbursement this Period 834.42	
Purpose of Disbursement PHONE SERVICES [CHO: SB23.6703]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BEN ROMERO		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 4475 E. RIDGE GATE RD.		Transaction ID : SB23.6620
City ANAHEIM State CA Zip Code 92807	Amount of Each Disbursement this Period 240.00	
Purpose of Disbursement SECURITY SERVICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 240.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. RORY DOLAN'S

Mailing Address 890 MCLEAN AVE

City YONKERS State NY Zip Code 10704

Purpose of Disbursement MEETING EXPENSE: MEALS [SCHILLER: SB23.6749]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 18 / 2015

Transaction ID : SB23.8687

Amount of Each Disbursement this Period

113.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RUTH CHRIS

Mailing Address 1030 W CANTON AVE #100

City WINTER PARK State FL Zip Code 32789

Purpose of Disbursement MEETING EXPENSE: MEALS [GEORGEVITS: SB23.6618]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 22 / 2015

Transaction ID : SB23.8697

Amount of Each Disbursement this Period

311.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GEORGE SAMPSON

Mailing Address 11333 MOORPARK STREET 154

City STUDIO CITY State CA Zip Code 91602

Purpose of Disbursement SECURITY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 14 / 2015

Transaction ID : SB23.6688

Amount of Each Disbursement this Period

390.00

Subtotal Of Receipts This Page (optional)..... 390.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SAMS CLUB		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 304 SHEEP DAVIS ROAD		Transaction ID : SB23.8713
City CONCORD	State NH	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6616]		Amount of Each Disbursement this Period 242.42
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SAMS CLUB		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 304 SHEEP DAVIS ROAD		Transaction ID : SB23.8714
City CONCORD	State NH	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 147.66
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SAMS CLUB		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 304 SHEEP DAVIS ROAD		Transaction ID : SB23.8715
City CONCORD	State NH	
Purpose of Disbursement TRAVEL: FUEL [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 66.28
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. SAMS CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 304 SHEEP DAVIS ROAD

City CONCORD State NH Zip Code 03301

Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 22 / 2015

Transaction ID : SB23.8716

Amount of Each Disbursement this Period: 96.23

[MEMO ITEM]

B. SCAVINO & ASSOCIATES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 47 ST. ANDREWS LN.

City HOPEWELL JUNCTION State NY Zip Code 12533

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2015

Transaction ID : SB23.7185

Amount of Each Disbursement this Period: 10000.00

C. SCAVINO & ASSOCIATES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 47 ST. ANDREWS LN.

City HOPEWELL JUNCTION State NY Zip Code 12533

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2015

Transaction ID : SB23.7186

Amount of Each Disbursement this Period: 5000.00

Subtotal Of Receipts This Page (optional)..... 15000.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SCAVINO & ASSOCIATES, LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 47 ST. ANDREWS LN.		Transaction ID : SB23.7187
City HOPEWELL JUNCTION	State NY	
Zip Code 12533	Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. DANIEL SCAVINO		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6649
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 2474.89
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. KEITH SCHILLER		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6749
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 585.21
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 13060.10

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SERAFINA EAST 61ST		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 33 EAST 61ST ST		Transaction ID : SB23.8726
City NEW YORK	State NY	
Purpose of Disbursement MEETING EXPENSE: MEALS [AMEX: SB23.6877]		Amount of Each Disbursement this Period 258.29
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SHERATON		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 5300 RIVERSIDE DR		Transaction ID : SB23.8742
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL: LODGING [MCENTEE: SB23.6732]		Amount of Each Disbursement this Period 247.37
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SHERATON		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 5300 RIVERSIDE DR		Transaction ID : SB23.8741
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL: LODGING [C&M: SB23.6896]		Amount of Each Disbursement this Period 605.27
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SHERATON ATLANTA AIRPORT HOTEL		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1900 SULLIVAN ROAD		Transaction ID : SB23.8744
City ATLANTA State GA Zip Code 30337	Amount of Each Disbursement this Period 234.80	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7325]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. SHERATON CLEVELAND AIRPORT		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 5300 RIVERSIDE DRIVE		Transaction ID : SB23.8746
City CLEVELAND State OH Zip Code 44135	Amount of Each Disbursement this Period 887.77	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7325]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. SHERATON HOTELS & RESORTS		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 5300 RIVERSIDE DRIVE		Transaction ID : SB23.8748
City CLEVELAND State OH Zip Code 44135	Amount of Each Disbursement this Period 520.28	
Purpose of Disbursement TRAVEL: LODGING [GRISHAM: SB23.6816]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SHERATON LAGUARDIA EAST HOTEL		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 135-20 39TH AVENUE		Transaction ID : SB23.8750
City FLUSHING State NY Zip Code 11354	Amount of Each Disbursement this Period 312.17	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7322]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. SHOPPES AT VALLEY WEST, LLC		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 2400 86TH STREET, SUITE 24		Transaction ID : SB23.7189
City URBANDALE State IA Zip Code 50322	Amount of Each Disbursement this Period 14525.00	
Purpose of Disbursement RENT	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. SLEEP INN		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 11211 HICKMAN RD		Transaction ID : SB23.8762
City URBANDALE State IA Zip Code 50322	Amount of Each Disbursement this Period 201.50	
Purpose of Disbursement TRAVEL: LODGING [LAUDNER: SB23.6647]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 14525.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SLS BEVERLY HILLS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 465 SOUTH LA CIENEGA BLVD		Transaction ID : SB23.8764
City LOS ANGELES	State CA	
Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6877]		Amount of Each Disbursement this Period 1985.98
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6679
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 919.95
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9280
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6679]		Amount of Each Disbursement this Period 919.95
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 919.95

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6677
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement FIELD CONSULTING	Category/Type	Amount of Each Disbursement this Period 2000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6680
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	Amount of Each Disbursement this Period 395.88
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9281
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6680]	Category/Type	Amount of Each Disbursement this Period 383.18
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 2395.88

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6681
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	Amount of Each Disbursement this Period 774.73
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9282
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6681]	Category/Type	Amount of Each Disbursement this Period 377.72
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6682
City COLUMBIA	State SC Zip Code 29201	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	Amount of Each Disbursement this Period 870.13
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 1644.86

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9283
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6682]		Amount of Each Disbursement this Period 494.10
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6678
City COLUMBIA	State SC	
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 2000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6683
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 236.71
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2236.71

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9284
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6683]		Amount of Each Disbursement this Period 149.62
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.6684
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		Amount of Each Disbursement this Period 630.07
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GAVIN SMITH		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 650 LINCOLN STREET SUITE 511		Transaction ID : SB23.9285
City COLUMBIA	State SC	
Purpose of Disbursement TRAVEL: MILEAGE [SMITH: SB23.6684]		Amount of Each Disbursement this Period 209.30
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Subtotal Of Receipts This Page (optional)..... 630.07

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SOUTHWEST		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8777
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 279.50	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6753]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. SOUTHWEST		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8778
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 266.00	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6754]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8780
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 323.00	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6751]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8781
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6751]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8782
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 382.00	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6752]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 2702 LOVE FIELD DRIVE		Transaction ID : SB23.8783
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 391.99	
Purpose of Disbursement TRAVEL: AIR [CHMIELEWSKI: SB23.6752]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. SPECIAL EVENTS OF NEW ENGLAND, LLC

Mailing Address PO BOX 5203

City MANCHESTER State NH Zip Code 03108

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23.7195

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. SPECIAL EVENTS OF NEW ENGLAND, LLC

Mailing Address PO BOX 5203

City MANCHESTER State NH Zip Code 03108

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23.7196

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY ROAD, SUITE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
DIRECT MAIL: PRINTING AND POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23.7197

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.8788
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 95.00
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GEORGEVITS: SB23.6615]		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.8789
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 335.00
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GEORGEVITS: SB23.6616]		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.8790
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 195.00
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GEORGEVITS: SB23.6616]		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.8791
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 195.00
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GEORGEVITS: SB23.6617]		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.7198
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 2467.20
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.7199
City MANCHESTER	State NH	
Zip Code 03102		Amount of Each Disbursement this Period 3200.00
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5667.20

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.7200
City MANCHESTER	State NH	
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE		Amount of Each Disbursement this Period 4688.09
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 95 EDDY ROAD, SUITE 101		Transaction ID : SB23.8792
City MANCHESTER	State NH	
Purpose of Disbursement PRINTING AND DESIGN SERVICES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 120.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. SPEEDPRO IMAGING		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 2053 SSE 37TH ST. STE. E		Transaction ID : SB23.7202
City GRIMES	State IA	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Amount of Each Disbursement this Period 4268.09
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4658.09

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. SPEEDPRO IMAGING

Mailing Address 2053 SSE 37TH ST. STE. E

City GRIMES State IA Zip Code 50111

Purpose of Disbursement PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 17 / 2015

Transaction ID : SB23.7203

Amount of Each Disbursement this Period: 795.00

Category/Type

Full Name (Last, First, Middle Initial)
B. SPRINGHILL SUITES

Mailing Address 1907 N LAMAR ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement TRAVEL: LODGING [CHMIELEWSKI: SB23.6754]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB23.8799

Amount of Each Disbursement this Period: 389.58

Category/Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. STAPLES

Mailing Address 500 STAPLES DR

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6775]

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 06 / 2015

Transaction ID : SB23.8822

Amount of Each Disbursement this Period: 265.02

Category/Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 795.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8823
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6775]		Amount of Each Disbursement this Period 4.36
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8824
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6777]		Amount of Each Disbursement this Period 244.19
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8818
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 110.26
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8819
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 178.91
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8825
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6778]		Amount of Each Disbursement this Period 44.05
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8807
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 183.55
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8808
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6615]		Amount of Each Disbursement this Period 12.58
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8813
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [LAUDNER: SB23.6643]		Amount of Each Disbursement this Period 38.51
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8829
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [TELION: SB23.7324]		Amount of Each Disbursement this Period 157.27
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8802
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [AMEX: SB23.6877]		Amount of Each Disbursement this Period 133.91
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8809
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 90.61
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8815
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [CHUMACEIRO: SB23.6665]		Amount of Each Disbursement this Period 24.42
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8826
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6780]		Amount of Each Disbursement this Period 42.41
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8827
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6782]		Amount of Each Disbursement this Period 92.88
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8828
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6784]		Amount of Each Disbursement this Period 23.94
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8803
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [AMEX: SB23.6878]		Amount of Each Disbursement this Period 28.51
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8804
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [AMEX: SB23.6878]		Amount of Each Disbursement this Period 58.57
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8805
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [AMEX: SB23.6878]		Amount of Each Disbursement this Period 28.51
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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SCHEDULE B-P ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8814
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [LAUDNER: SB23.6646]		Amount of Each Disbursement this Period 2015 121.83
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8816
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [SMITH: SB23.6684]		Amount of Each Disbursement this Period 2015 8.26
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8817
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [SMITH: SB23.6684]		Amount of Each Disbursement this Period 2015 83.86
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8810
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 84.48
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8811
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 201.96
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 500 STAPLES DR		Transaction ID : SB23.8806
City FRAMINGHAM	State MA	
Purpose of Disbursement OFFICE SUPPLIES [AMEX: SB23.6879]		Amount of Each Disbursement this Period 79.18
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. STATE OF NEW HAMPSHIRE

Mailing Address NH DEPARTMENT OF SAFETY
JAMES HAYES BLDG. 33 HAZEN DRIVE

City CONCORD State NH Zip Code 03305

Purpose of Disbursement SECURITY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB23.7205

Amount of Each Disbursement this Period: 595.00

Category/Type

Full Name (Last, First, Middle Initial)
B. STRATEGY RESOURCES

Mailing Address 500 RIVERVIEW DRIVE

City ROCKFORD State IA Zip Code 50468

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 02 / 2015

Transaction ID : SB23.7206

Amount of Each Disbursement this Period: 15000.00

Category/Type

Full Name (Last, First, Middle Initial)
C. STRATEGY RESOURCES

Mailing Address 500 RIVERVIEW DRIVE

City ROCKFORD State IA Zip Code 50468

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2015

Transaction ID : SB23.7207

Amount of Each Disbursement this Period: 15000.00

Category/Type

Subtotal Of Receipts This Page (optional)..... 30595.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRATEGY RESOURCES		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 500 RIVERVIEW DRIVE		Transaction ID : SB23.7208
City ROCKFORD	State IA	
Purpose of Disbursement STRATEGY CONSULTING	Zip Code 50468	Amount of Each Disbursement this Period 15000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7210
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Zip Code 94110	Amount of Each Disbursement this Period 4982.35
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7211
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Zip Code 94110	Amount of Each Disbursement this Period 2324.40
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 22306.75

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7212
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 2211.89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7213
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1044.19
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7214
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 838.38
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 4094.46

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7215
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 3495.08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7216
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1672.44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7217
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1615.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 6782.75

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7218
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1770.91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7219
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1283.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7220
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 5870.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 8925.01

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 27 / 2015

Transaction ID : SB23.7221

Amount of Each Disbursement this Period
15.00

Full Name (Last, First, Middle Initial)
B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 27 / 2015

Transaction ID : SB23.7222

Amount of Each Disbursement this Period
1317.52

Full Name (Last, First, Middle Initial)
C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 28 / 2015

Transaction ID : SB23.7223

Amount of Each Disbursement this Period
1402.21

Subtotal Of Receipts This Page (optional)..... → 2734.73

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7224
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7225
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7226
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1139.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 1169.33

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7227
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 1029.06
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7228
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 2400.84
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7229
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 637.14
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4067.04

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7230
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 636.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7231
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 890.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7232
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 744.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 2271.12

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7233
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 2599.49
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7234
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 859.87
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7235
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 741.88
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4201.24

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7236
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 671.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7237
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 3461.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7238
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1301.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional).....	5434.95
Total This Period (last page this line number only).....	

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7239
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 4216.38
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7240
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 799.81
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7241
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 1606.91
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6623.10

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Transaction ID : SB23.7242

Amount of Each Disbursement this Period

										6	5	1	.	6	6
--	--	--	--	--	--	--	--	--	--	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

Transaction ID : SB23.7243

Amount of Each Disbursement this Period

										9	9	0	.	4	2
--	--	--	--	--	--	--	--	--	--	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City State Zip Code
SAN FRANCISCO CA 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : SB23.7244

Amount of Each Disbursement this Period

										3	0	.	0	0
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Subtotal Of Receipts This Page (optional)..... 1672.08

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7245
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 75.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7246
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 625.73
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7247
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 394.13
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1094.86

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 3180 18TH STREET		Transaction ID : SB23.7248
City SAN FRANCISCO	State CA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1126.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. SUBWAY		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8850
City MILFORD	State CT	
Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6615]	Candidate Name	Amount of Each Disbursement this Period 22.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. SUBWAY		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8857
City MILFORD	State CT	
Purpose of Disbursement TRAVEL: MEALS [WHITEHOUSE: SB23.6744]	Candidate Name	Amount of Each Disbursement this Period 19.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	[MEMO ITEM]	

Subtotal Of Receipts This Page (optional)..... 1126.25

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SUBWAY		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8851
City MILFORD	State CT	
Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 74.12
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. SUBWAY		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8852
City MILFORD	State CT	
Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 122.08
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. SUBWAY		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8853
City MILFORD	State CT	
Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 33.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. SUBWAY		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8854
City MILFORD	State CT	
Zip Code 06461	Purpose of Disbursement CATERING SERVICES [GEORGEVITS: SB23.6618]	Amount of Each Disbursement this Period 185.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SUBWAY		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 325 SUB WAY		Transaction ID : SB23.8855
City MILFORD	State CT	
Zip Code 06461	Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6618]	Amount of Each Disbursement this Period 13.08
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SUPER COLOR DIGITAL, LLC		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 3451 W. MARTIN AVE. SUITE A		Transaction ID : SB23.7249
City LAS VEGAS	State NV	
Zip Code 89118	Purpose of Disbursement PRINTING: BANNERS	Amount of Each Disbursement this Period 560.44
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 560.44

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. SUPER COLOR DIGITAL, LLC

Mailing Address 3451 W. MARTIN AVE. SUITE A

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement
PRINTING: BANNERS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
 07 08 2015

Transaction ID : SB23.7250

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. SUPER COLOR DIGITAL, LLC

Mailing Address 3451 W. MARTIN AVE. SUITE A

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement
PRINTING: BANNERS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
 07 28 2015

Transaction ID : SB23.7251

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SUPER COLOR DIGITAL, LLC

Mailing Address 3451 W. MARTIN AVE. SUITE A

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement
PRINTING: BANNERS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
 08 18 2015

Transaction ID : SB23.7252

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. T-BONES GREAT AMERICAN EATERY		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1182 UNION AVENUE		Transaction ID : SB23.8889
City LACONIA	State NH	
Purpose of Disbursement TRAVEL: MEALS [GEORGEVITS: SB23.6616]		Amount of Each Disbursement this Period 137.83
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. TAG AIR, INC.		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 3800 SOUTHERN BLVD. STE. 105		Transaction ID : SB23.7253
City WEST PALM BEACH	State FL	
Purpose of Disbursement TRAVEL: AIRFARE		Amount of Each Disbursement this Period 422730.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. TAG AIR, INC.		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 3800 SOUTHERN BLVD. STE. 105		Transaction ID : SB23.7254
City WEST PALM BEACH	State FL	
Purpose of Disbursement TRAVEL: AIRFARE		Amount of Each Disbursement this Period 300696.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 723426.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JEFF TAILLON		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1612 RUTLAND COURT		Transaction ID : SB23.6714
City COLUMBIA State SC Zip Code 29206	Amount of Each Disbursement this Period 139.04	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JEFF TAILLON		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1612 RUTLAND COURT		Transaction ID : SB23.7449
City COLUMBIA State SC Zip Code 29206	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement FIELD CONSULTING	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C. JEFF TAILLON		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1612 RUTLAND COURT		Transaction ID : SB23.9287
City COLUMBIA State SC Zip Code 29206	Amount of Each Disbursement this Period 139.04	
Purpose of Disbursement TRAVEL: MILEAGE [TAILLON: SB23.6714]	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4639.04

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JEFF TAILLON		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1612 RUTLAND COURT		Transaction ID : SB23.6712
City COLUMBIA State SC Zip Code 29206	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JEFF TAILLON		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1612 RUTLAND COURT		Transaction ID : SB23.6713
City COLUMBIA State SC Zip Code 29206	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7255
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 453.99	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 9453.99

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7256
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 227.20	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7257
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 211.00	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7258
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 324.81	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 763.01

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7259
City ALEXANDRIA	State VA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7260
City ALEXANDRIA	State VA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 329.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7261
City ALEXANDRIA	State VA	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 886.43
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 2716.15

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7262
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 411.39	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7263
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 616.08	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7264
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 777.73	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1805.20

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7265
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 618.46	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7266
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1459.15	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7267
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 658.04	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2735.65

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 17 / 2015

Transaction ID : SB23.7268

Amount of Each Disbursement this Period
185.24

Category/Type

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 20 / 2015

Transaction ID : SB23.7269

Amount of Each Disbursement this Period
357.30

Category/Type

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 21 / 2015

Transaction ID : SB23.7270

Amount of Each Disbursement this Period
417.55

Category/Type

Subtotal Of Receipts This Page (optional)..... 960.09

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7271
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 716.87	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7272
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 780.30	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7273
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 506.28	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2003.45

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7274
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 360.15	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7275
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 418.75	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7276
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 891.86	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1670.76

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2015

Transaction ID : SB23.7277

Amount of Each Disbursement this Period: 359.47

Category/Type

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2015

Transaction ID : SB23.7278

Amount of Each Disbursement this Period: 513.63

Category/Type

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 03 / 2015

Transaction ID : SB23.7279

Amount of Each Disbursement this Period: 301.19

Category/Type

Subtotal Of Receipts This Page (optional)..... 1174.29

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7280
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 408.57	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7281
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 985.45	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7282
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 3980.14	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 5374.16

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7283
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period \$ 521.64	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7284
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period \$ 1777.62	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7285
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period \$ 715.39	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → \$ 3014.65

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7286
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 999,999,999.99 650.24	
Purpose of Disbursement MERCHANT FEES	Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7287
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 999,999,999.99 395.14	
Purpose of Disbursement MERCHANT FEES	Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7288
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 999,999,999.99 174.45	
Purpose of Disbursement MERCHANT FEES	Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 1219.83

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7289
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 906.45	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7290
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1577.70	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7291
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1311.68	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3795.83

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7292
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 570.96	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7293
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1172.77	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7294
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 549.23	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 2292.96

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7295
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2210.74	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7296
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 648.27	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7297
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1193.75	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 4052.76

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7298
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 732.63	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7299
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 488.78	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7300
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 981.26	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2202.67

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7301
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 295.69	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7302
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 206.34	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7303
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 630.60	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 1132.63

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7304
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1174.51	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7305
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 330.81	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7306
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 122.15	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 1627.47

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement
Mailing Address 1033 NORTH FAIRFAX STREET #40		M M / D D / Y Y Y Y 09 / 14 / 2015
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MERCHANT FEES	Transaction ID : SB23.7307	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	165.60	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGETED VICTORY		Date of Disbursement
Mailing Address 1033 NORTH FAIRFAX STREET #40		M M / D D / Y Y Y Y 09 / 15 / 2015
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MERCHANT FEES	Transaction ID : SB23.7308	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	372.42	
State: District:		

Full Name (Last, First, Middle Initial) C. TARGETED VICTORY		Date of Disbursement
Mailing Address 1033 NORTH FAIRFAX STREET #40		M M / D D / Y Y Y Y 09 / 16 / 2015
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MERCHANT FEES	Transaction ID : SB23.7309	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	603.62	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1141.64

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2015

Transaction ID : SB23.7310

Amount of Each Disbursement this Period
559.68

Full Name (Last, First, Middle Initial)
B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 18 / 2015

Transaction ID : SB23.7311

Amount of Each Disbursement this Period
337.62

Full Name (Last, First, Middle Initial)
C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.7312

Amount of Each Disbursement this Period
354.28

Subtotal Of Receipts This Page (optional)..... **1251.58**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 22 / 2015

Transaction ID : SB23.7313

Amount of Each Disbursement this Period
420.16

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB23.7314

Amount of Each Disbursement this Period
746.05

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB23.7315

Amount of Each Disbursement this Period
198.51

Subtotal Of Receipts This Page (optional)..... 1364.72

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 25 / 2015

Transaction ID : SB23.7316

Amount of Each Disbursement this Period
1514.43

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 28 / 2015

Transaction ID : SB23.7317

Amount of Each Disbursement this Period
1019.72

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX STREET #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 29 / 2015

Transaction ID : SB23.7318

Amount of Each Disbursement this Period
135.98

Subtotal Of Receipts This Page (optional)..... 1670.13

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1100 / 1212

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1033 NORTH FAIRFAX STREET #40		Transaction ID : SB23.7319
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 11,111.11 22,222.22 33,333.33 44,444.44 55,555.56 66,666.67 77,777.78 88,888.89 99,999.90 111,111.11 122,222.22 133,333.33 144,444.44 155,555.56 166,666.67 177,777.78 188,888.89 199,999.90 210,101.01 221,212.12 232,323.23 243,434.34 254,545.45 265,646.35 276,747.26 287,848.17 298,949.08 309,050.99 320,151.90 331,252.81 342,353.72 353,454.63 364,555.54 375,656.45 386,757.36 397,858.27 408,959.18 420,060.09 431,160.99 442,261.90 453,362.81 464,463.72 475,564.63 486,665.54 497,766.45 508,867.36 519,968.27 531,069.18 542,170.09 553,270.99 564,371.90 575,472.81 586,573.72 597,674.63 608,775.54 619,876.45 631,977.36 643,078.27 654,179.18 665,280.09 676,380.99 687,481.90 698,582.81 709,683.72 720,784.63 731,885.54 742,986.45 754,087.36 765,188.27 776,289.18 787,390.09 798,490.99 809,591.90 820,692.81 831,793.72 842,894.63 853,995.54 865,096.45 876,197.36 887,298.27 898,399.18 909,500.09 920,600.99 931,701.90 942,802.81 953,903.72 965,004.63 976,105.54 987,206.45 998,307.36	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TAYLOR RENTAL CENTER		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 231 SOUTH MAIN STREET		Transaction ID : SB23.7320
City CONCORD State NH Zip Code 03301	Amount of Each Disbursement this Period 11,111.11 22,222.22 33,333.33 44,444.44 55,555.56 66,666.67 77,777.78 88,888.89 99,999.90 111,111.11 122,222.22 133,333.33 144,444.44 155,555.56 166,666.67 177,777.78 188,888.89 199,999.90 210,101.01 221,212.12 232,323.23 243,434.34 254,545.45 265,646.35 276,747.26 287,848.17 298,949.08 309,050.99 320,151.90 331,252.81 342,353.72 353,454.63 364,555.54 375,656.45 386,757.36 397,858.27 408,959.18 420,060.09 431,160.99 442,261.90 453,362.81 464,463.72 475,564.63 486,665.54 497,766.45 508,867.36 519,968.27 531,069.18 542,170.09 553,270.99 564,371.90 575,472.81 586,573.72 597,674.63 608,775.54 619,876.45 631,977.36 643,078.27 654,179.18 665,280.09 676,380.99 687,481.90 698,582.81 709,683.72 720,784.63 731,885.54 742,986.45 754,087.36 765,188.27 776,289.18 787,390.09 798,490.99 809,591.90 820,692.81 831,793.72 842,894.63 853,995.54 865,096.45 876,197.36 887,298.27 898,399.18 909,500.09 920,600.99 931,701.90 942,802.81 953,903.72 965,004.63 976,105.54 987,206.45 998,307.36	
Purpose of Disbursement EVENT STAGING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TAYLOR RENTAL CENTER		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 231 SOUTH MAIN STREET		Transaction ID : SB23.8907
City CONCORD State NH Zip Code 03301	Amount of Each Disbursement this Period 11,111.11 22,222.22 33,333.33 44,444.44 55,555.56 66,666.67 77,777.78 88,888.89 99,999.90 111,111.11 122,222.22 133,333.33 144,444.44 155,555.56 166,666.67 177,777.78 188,888.89 199,999.90 210,101.01 221,212.12 232,323.23 243,434.34 254,545.45 265,646.35 276,747.26 287,848.17 298,949.08 309,050.99 320,151.90 331,252.81 342,353.72 353,454.63 364,555.54 375,656.45 386,757.36 397,858.27 408,959.18 420,060.09 431,160.99 442,261.90 453,362.81 464,463.72 475,564.63 486,665.54 497,766.45 508,867.36 519,968.27 531,069.18 542,170.09 553,270.99 564,371.90 575,472.81 586,573.72 597,674.63 608,775.54 619,876.45 631,977.36 643,078.27 654,179.18 665,280.09 676,380.99 687,481.90 698,582.81 709,683.72 720,784.63 731,885.54 742,986.45 754,087.36 765,188.27 776,289.18 787,390.09 798,490.99 809,591.90 820,692.81 831,793.72 842,894.63 853,995.54 865,096.45 876,197.36 887,298.27 898,399.18 909,500.09 920,600.99 931,701.90 942,802.81 953,903.72 965,004.63 976,105.54 987,206.45 998,307.36	
Purpose of Disbursement EVENT STAGING EXPENSE [GEORGEVITS: SB23.6616]	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1121.23

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TELION CORP		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7322
City BOCA RATON State FL Zip Code 33433	Amount of Each Disbursement this Period 2577.01	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TELION CORP		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7462
City BOCA RATON State FL Zip Code 33433	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement EVENT CONSULTING	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C. TELION CORP		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7323
City BOCA RATON State FL Zip Code 33433	Amount of Each Disbursement this Period 990.48	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 8067.49

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. TELION CORP

Mailing Address 7000 WEST PALMETTO PARK ROAD
SUITE 210

City BOCA RATON State FL Zip Code 33433

Purpose of Disbursement
EVENT CONSULTING

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
07 / 24 / 2015

Transaction ID : SB23.7463

Amount of Each Disbursement this Period
1875.00

Category/Type
101

Full Name (Last, First, Middle Initial)
B. TELION CORP

Mailing Address 7000 WEST PALMETTO PARK ROAD
SUITE 210

City BOCA RATON State FL Zip Code 33433

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 28 / 2015

Transaction ID : SB23.7324

Amount of Each Disbursement this Period
3607.46

Category/Type
101

Full Name (Last, First, Middle Initial)
C. TELION CORP

Mailing Address 7000 WEST PALMETTO PARK ROAD
SUITE 210

City BOCA RATON State FL Zip Code 33433

Purpose of Disbursement
EVENT CONSULTING

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
07 / 28 / 2015

Transaction ID : SB23.7464

Amount of Each Disbursement this Period
5625.00

Category/Type
101

Subtotal Of Receipts This Page (optional)..... 11107.46

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TELION CORP		Date of Disbursement
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		M M / D D / Y Y Y Y 08 / 13 / 2015
City BOCA RATON State FL Zip Code 33433	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Transaction ID : SB23.7325
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period
State: District:	Category/Type 101	
Full Name (Last, First, Middle Initial) B. TELION CORP		Date of Disbursement
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		M M / D D / Y Y Y Y 08 / 13 / 2015
City BOCA RATON State FL Zip Code 33433	Purpose of Disbursement EVENT CONSULTING	Transaction ID : SB23.7465
Candidate Name		
Office 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) ▼	Amount of Each Disbursement this Period
State: District:	Category/Type 101	
Full Name (Last, First, Middle Initial) C. TELION CORP		Date of Disbursement
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		M M / D D / Y Y Y Y 08 / 21 / 2015
City BOCA RATON State FL Zip Code 33433	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Transaction ID : SB23.7326
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period
State: District:	Category/Type 101	

Subtotal Of Receipts This Page (optional)..... → 13474.43

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TELION CORP		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7466
City BOCA RATON	State FL	
Purpose of Disbursement EVENT CONSULTING	Category/Type 101	Amount of Each Disbursement this Period 4500.00
Candidate Name	Office 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:	

Full Name (Last, First, Middle Initial) B. TELION CORP		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7327
City BOCA RATON	State FL	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	Amount of Each Disbursement this Period 5867.76
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. TELION CORP		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 7000 WEST PALMETTO PARK ROAD SUITE 210		Transaction ID : SB23.7467
City BOCA RATON	State FL	
Purpose of Disbursement EVENT CONSULTING	Category/Type 101	Amount of Each Disbursement this Period 9750.00
Candidate Name	Office 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:	

Subtotal Of Receipts This Page (optional)..... 20117.76

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. THE ARIZONA BILTMORE		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 2400 EAST MISSOURI AVENUE		Transaction ID : SB23.7329
City PHOENIX	State AZ	
Purpose of Disbursement FACILITY RENTAL	Zip Code 85016	Amount of Each Disbursement this Period 5187.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. THE DAILY DENA, INC.		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 324 3RD AVE. #1		Transaction ID : SB23.7332
City QUANTICO	State VA	
Purpose of Disbursement FIELD CONSULTING	Zip Code 22134	Amount of Each Disbursement this Period 2800.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. THE DAILY DENA, INC.		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 324 3RD AVE. #1		Transaction ID : SB23.7333
City QUANTICO	State VA	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Zip Code 22134	Amount of Each Disbursement this Period 698.69
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 8685.69

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. THE HOME DEPOT		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 980 3RD AVE		Transaction ID : SB23.8931
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement OFFICE SUPPLIES [POWERS: SB23.6777]	Amount of Each Disbursement this Period 375.43
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. THE MASON CITY FOUNDATION		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 308 S PENNSYLVANIA		Transaction ID : SB23.8935
City MASON CITY	State IA	
Zip Code 50401	Purpose of Disbursement MEETING EXPENSE: MEALS [LAUDNER: SB23.6642]	Amount of Each Disbursement this Period 660.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. THE QUARRY		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 10 SOUTH FEDERAL AVENUE		Transaction ID : SB23.8947
City MASON CITY	State IA	
Zip Code 50401	Purpose of Disbursement MEETING EXPENSE: MEALS [NAGEL: SB23.6629]	Amount of Each Disbursement this Period 240.44
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. THE TRUMP CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.7334
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 9583.33
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. THE TRUMP CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.7335
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 35457.50
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TOWN OF HAMPTON		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 100 WINNACUNNET RD.		Transaction ID : SB23.7337
City HAMPTON	State NH	
Zip Code 03842	Purpose of Disbursement SECURITY SERVICES	Amount of Each Disbursement this Period 1314.99
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → 46355.82

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TOWNPLACE SUITES		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 686 HUSE ROAD		Transaction ID : SB23.8989
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: LODGING [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 238.71
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. TOWNPLACE SUITES		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 686 HUSE ROAD		Transaction ID : SB23.8990
City MANCHESTER	State NH	
Purpose of Disbursement TRAVEL: LODGING [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 206.01
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. TRAVELOCITY		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 3150 SABRE DRIVE		Transaction ID : SB23.8992
City SOUTHLAKE	State TX	
Purpose of Disbursement TRAVEL: AIR [GRISHAM: SB23.6816]		Amount of Each Disbursement this Period 327.60
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150496
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT (SEE MEMOS BELOW)	Zip Code 10022	Amount of Each Disbursement this Period 15000.00
Candidate Name	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) B. TRUMP CPS LLC		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150496.0
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT	Zip Code 10022	Amount of Each Disbursement this Period 6000.00
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. TRUMP PLAZA LLC		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150496.1
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT	Zip Code 10022	Amount of Each Disbursement this Period 9000.00
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 15000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y
07 / 02 / 2015

Transaction ID : SB23.150366

Amount of Each Disbursement this Period: 514.88

Category/Type

B. KEITH SCHILLER

Full Name (Last, First, Middle Initial)
Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y
07 / 02 / 2015

Transaction ID : SB23.150366.0

Amount of Each Disbursement this Period: 514.88

Category/Type: 101

[MEMO ITEM]

C. TRUMP TOWER COMMERCIAL LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement
PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y
07 / 02 / 2015

Transaction ID : SB23.150366.1

Amount of Each Disbursement this Period: 514.88

Category/Type: 101

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 514.88

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150367
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)		Amount of Each Disbursement this Period 2574.43
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) B. KEITH SCHILLER		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.150367.0
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL		Amount of Each Disbursement this Period 2574.43
Candidate Name		Category/ Type 101
Office 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:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150367.1
City HICKSVILLE	State NY	
Purpose of Disbursement PRE-PAID PAYROLL		Amount of Each Disbursement this Period 2574.43
Candidate Name		Category/ Type 101
Office 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:	[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 07 / 11 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150368
City NEW YORK	State NY	
Zip Code 10022		Amount of Each Disbursement this Period 4049.62
Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) B. HOPE HICKS		Date of Disbursement MM / DD / YYYY 07 / 11 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150368.0
City NEW YORK	State NY	
Zip Code 10022		Amount of Each Disbursement this Period 1453.70
Purpose of Disbursement PRE-PAID PAYROLL		Category/ Type 101
Candidate Name		
Office 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) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 07 / 11 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150368.1
City NEW YORK	State NY	
Zip Code 10022		Amount of Each Disbursement this Period 2595.92
Purpose of Disbursement PRE-PAID PAYROLL		Category/ Type 101
Candidate Name		
Office 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) ▼	[MEMO ITEM]
State: District:		

Subtotal Of Receipts This Page (optional)..... 4049.62

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TRUMP PAYROLL CORP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL Category/Type 101

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2015

Transaction ID : SB23.150368.2

Amount of Each Disbursement this Period: 4049.62

[MEMO ITEM]

B. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW) Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 07 / 23 / 2015

Transaction ID : SB23.150369

Amount of Each Disbursement this Period: 2574.43

C. KEITH SCHILLER

Full Name (Last, First, Middle Initial)
Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL Category/Type 101

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2015

Transaction ID : SB23.150369.0

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150369.1
City HICKSVILLE	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 11802	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 07 / 25 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150370
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Zip Code 10022	Amount of Each Disbursement this Period 4049.64
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) C. HOPE HICKS		Date of Disbursement MM / DD / YYYY 07 / 25 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150370.0
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 10022	Amount of Each Disbursement this Period 1453.72
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Subtotal Of Receipts This Page (optional)..... 4049.64

Total This Period (last page this line number only).....

SCHEDULE B-P
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 07 / 25 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150370.1
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/Type 101	Amount of Each Disbursement this Period 2595.92
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. TRUMP PAYROLL CORP		Date of Disbursement MM / DD / YYYY 07 / 25 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150370.2
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/Type 101	Amount of Each Disbursement this Period 4049.64
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150511
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: SOFTWARE SUBSCRIPTION (SEE MEMO BELOW)	Category/Type 101	Amount of Each Disbursement this Period 224.00
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00	

Subtotal Of Receipts This Page (optional)..... **224.00**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. VOLUSION

Full Name (Last, First, Middle Initial)

Mailing Address 1835 KRAMER LANE #100

City AUSTIN State TX Zip Code 78758

Purpose of Disbursement IN-KIND: SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2015

Transaction ID : SB23.150511.0

Amount of Each Disbursement this Period: 224.00

[MEMO ITEM]

B. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 07 / 30 / 2015

Transaction ID : SB23.150371

Amount of Each Disbursement this Period: 2574.43

C. KEITH SCHILLER

Full Name (Last, First, Middle Initial)

Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2015

Transaction ID : SB23.150371.0

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TRUMP TOWER COMMERCIAL LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2015

Transaction ID : SB23.150371.1

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

B. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: RENT (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 08 / 01 / 2015

Transaction ID : SB23.150502

Amount of Each Disbursement this Period: 15000.00

C. TRUMP CPS LLC

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2015

Transaction ID : SB23.150502.0

Amount of Each Disbursement this Period: 6000.00

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 15000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. TRUMP PLAZA LLC

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2015

Transaction ID : SB23.150502.1

Amount of Each Disbursement this Period: 9000.00

[MEMO ITEM]

Category/Type: 101

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: MM / DD / YYYY
08 / 06 / 2015

Transaction ID : SB23.150372

Amount of Each Disbursement this Period: 4958.38

Category/Type:

Full Name (Last, First, Middle Initial)
C. KEITH SCHILLER

Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 06 / 2015

Transaction ID : SB23.150372.0

Amount of Each Disbursement this Period: 4958.38

[MEMO ITEM]

Category/Type: 101

Subtotal Of Receipts This Page (optional)..... 4958.38

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150372.1
City HICKSVILLE	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 11802	Amount of Each Disbursement this Period 4958.38
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150373
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Zip Code 10022	Amount of Each Disbursement this Period 1713.32
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) C. HOPE HICKS		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150373.0
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 10022	Amount of Each Disbursement this Period 1453.72
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... → 1713.32

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150373.1
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 10022	Amount of Each Disbursement this Period 259.60
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) B. TRUMP PAYROLL CORP		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150373.2
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Zip Code 10022	Amount of Each Disbursement this Period 1713.32
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150374
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Zip Code 10022	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. KEITH SCHILLER

Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2015

Transaction ID : SB23.150374.0

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. TRUMP TOWER COMMERCIAL LLC

Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2015

Transaction ID : SB23.150374.1

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2015

Transaction ID : SB23.150375

Amount of Each Disbursement this Period: 4127.33

Subtotal Of Receipts This Page (optional)..... 4127.33

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. KEITH SCHILLER		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.150375.0
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 2574.43
Candidate Name		[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) B. BERT MENTOR		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150375.1
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 807.76
Candidate Name		[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. RON JURIAN		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150375.2
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 745.14
Candidate Name		[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150375.3
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 4127.33
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 08 / 22 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150376
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Amount of Each Disbursement this Period 3063.20
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) C. HOPE HICKS		Date of Disbursement MM / DD / YYYY 08 / 22 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150376.0
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 1453.72
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Subtotal Of Receipts This Page (optional)..... 3063.20

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. AMANDA MILLER			Date of Disbursement MM / DD / YYYY 08 / 22 / 2015		
Mailing Address 725 FIFTH AVE.			Transaction ID : SB23.150376.1		
City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 0.00		
Purpose of Disbursement PRE-PAID PAYROLL		Category/ Type 101	[MEMO ITEM]		
Candidate Name					
Office 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:				
Full Name (Last, First, Middle Initial) B. JUSTIN MCCONNEY			Date of Disbursement MM / DD / YYYY 08 / 22 / 2015		
Mailing Address 725 FIFTH AVENUE			Transaction ID : SB23.150376.2		
City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 0.00		
Purpose of Disbursement PRE-PAID PAYROLL		Category/ Type 101	[MEMO ITEM]		
Candidate Name					
Office 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:				
Full Name (Last, First, Middle Initial) C. MATTHEW LADOLCATT			Date of Disbursement MM / DD / YYYY 08 / 22 / 2015		
Mailing Address 725 FIFTH AVENUE			Transaction ID : SB23.150376.3		
City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 0.00		
Purpose of Disbursement PRE-PAID PAYROLL		Category/ Type 101	[MEMO ITEM]		
Candidate Name					
Office 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:				

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TRUMP PAYROLL CORP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2015

Transaction ID : SB23.150376.4

Amount of Each Disbursement this Period: 3063.20

[MEMO ITEM]

B. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 08 / 27 / 2015

Transaction ID : SB23.150377

Amount of Each Disbursement this Period: 4164.59

C. KEITH SCHILLER

Full Name (Last, First, Middle Initial)
Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2015

Transaction ID : SB23.150377.0

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 4164.59

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. BERT MENTOR		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150377.1
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 683.04
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) B. RON JURIAN		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150377.2
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 907.12
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) C. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150377.3
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 4164.59
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150506
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT (SEE MEMOS BELOW)	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 15000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) B. TRUMP CPS LLC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150506.0
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 6000.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. TRUMP PLAZA LLC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150506.1
City NEW YORK	State NY	
Purpose of Disbursement IN-KIND: RENT	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 9000.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 15000.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. DONALD J. TRUMP

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 09 / 03 / 2015

Transaction ID : SB23.150378

Amount of Each Disbursement this Period: 3954.54

Category/Type

B. KEITH SCHILLER

Full Name (Last, First, Middle Initial)
Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2015

Transaction ID : SB23.150378.0

Amount of Each Disbursement this Period: 2574.43

Category/Type: 101

[MEMO ITEM]

C. BERT MENTOR

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVE.

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2015

Transaction ID : SB23.150378.1

Amount of Each Disbursement this Period: 392.00

Category/Type: 101

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 3954.54

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RON JURIAN		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150378.2
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 988.11
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) B. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150378.3
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 3954.54
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150379
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Amount of Each Disbursement this Period 2460.94
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 2460.94

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. HOPE HICKS		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150379.0
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 1453.72
Candidate Name		[MEMO ITEM]
Office 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:		
Full Name (Last, First, Middle Initial) B. AMANDA MILLER		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150379.1
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 259.60
Candidate Name		[MEMO ITEM]
Office 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:		
Full Name (Last, First, Middle Initial) C. JUSTIN MCCONNEY		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150379.2
City NEW YORK	State NY	
Purpose of Disbursement PRE-PAID PAYROLL	Category/ Type 101	Amount of Each Disbursement this Period 747.62
Candidate Name		[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP PAYROLL CORP		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150379.3
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 2460.94
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150380
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) C. KEITH SCHILLER		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.150380.0
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)
A. TRUMP TOWER COMMERCIAL LLC

Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 10 / 2015

Transaction ID : SB23.150380.1

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 09 / 17 / 2015

Transaction ID : SB23.150381

Amount of Each Disbursement this Period: 2574.43

Full Name (Last, First, Middle Initial)
C. KEITH SCHILLER

Mailing Address 725 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement PRE-PAID PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 17 / 2015

Transaction ID : SB23.150381.0

Amount of Each Disbursement this Period: 2574.43

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2574.43

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150381.1
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 09 / 19 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150382
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Amount of Each Disbursement this Period 2460.94
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) C. HOPE HICKS		Date of Disbursement MM / DD / YYYY 09 / 19 / 2015
Mailing Address 725 5TH AVENUE 25TH FLOOR		Transaction ID : SB23.150382.0
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 1453.72
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:	

Subtotal Of Receipts This Page (optional)..... 2460.94

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

<p>Full Name (Last, First, Middle Initial) A. AMANDA MILLER</p> <p>Mailing Address 725 FIFTH AVE.</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement PRE-PAID PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 19 / 2015</p> <p>Transaction ID : SB23.150382.1</p> <p>Amount of Each Disbursement this Period 259.60</p> <p>[MEMO ITEM]</p>
<p>Full Name (Last, First, Middle Initial) B. JUSTIN MCCONNEY</p> <p>Mailing Address 725 FIFTH AVENUE</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement PRE-PAID PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 19 / 2015</p> <p>Transaction ID : SB23.150382.2</p> <p>Amount of Each Disbursement this Period 747.62</p> <p>[MEMO ITEM]</p>
<p>Full Name (Last, First, Middle Initial) C. TRUMP PAYROLL CORP</p> <p>Mailing Address 725 FIFTH AVENUE</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement PRE-PAID PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 19 / 2015</p> <p>Transaction ID : SB23.150382.3</p> <p>Amount of Each Disbursement this Period 2460.94</p> <p>[MEMO ITEM]</p>

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.150383
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement IN-KIND: PRE-PAID PAYROLL (SEE MEMOS BELOW)	Amount of Each Disbursement this Period 4591.67
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) B. KEITH SCHILLER		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.150383.0
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 2574.43
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. BERT MENTOR		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150383.1
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 1045.33
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Subtotal Of Receipts This Page (optional)..... 4591.67

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. RON JURIAN		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.150383.2
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 971.91
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) B. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.150383.3
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement PRE-PAID PAYROLL	Amount of Each Disbursement this Period 4591.67
Candidate Name	Category/ Type 101	[MEMO ITEM]
Office 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:		

Full Name (Last, First, Middle Initial) C. TRUMP HOTEL		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 2000 FASHION SHOW DR		Transaction ID : SB23.9001
City LAS VEGAS	State NV	
Zip Code 89109	Purpose of Disbursement TRAVEL: LODGING [AMEX: SB23.6878]	Amount of Each Disbursement this Period 286.73
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP INTERNATIONAL HOTEL		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1 CENTRAL PARK WEST		Transaction ID : SB23.9003
City NEW YORK	State NY	
Zip Code 10023	Purpose of Disbursement TRAVEL: LODGING [MCMULLEN: SB23.7057]	Amount of Each Disbursement this Period 516.39
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TRUMP INTL HOTEL		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 2000 FASHION SHOW DR		Transaction ID : SB23.9007
City LAS VEGAS	State NV	
Zip Code 89109	Purpose of Disbursement TRAVEL: LODGING [C&M: SB23.6896]	Amount of Each Disbursement this Period 335.59
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TRUMP RESTAURANTS LLC		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 725 FIFTH AVE.		Transaction ID : SB23.7340
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 1483.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1483.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. TRUMP RESTAURANTS LLC

Full Name (Last, First, Middle Initial)
Mailing Address 725 FIFTH AVE.

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2015

Transaction ID : SB23.7339

Amount of Each Disbursement this Period: 702.24

Category/Type

B. TRUMP TOWER COMMERCIAL LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2015

Transaction ID : SB23.7341

Amount of Each Disbursement this Period: 25874.17

Category/Type

C. TRUMP TOWER COMMERCIAL LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1926

City HICKSVILLE State NY Zip Code 11802

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2015

Transaction ID : SB23.7342

Amount of Each Disbursement this Period: 35457.50

Category/Type

Subtotal Of Receipts This Page (optional)..... 62033.91

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. TRUMP TOWER COMMERCIAL LLC		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO BOX 1926		Transaction ID : SB23.7343
City HICKSVILLE	State NY	
Zip Code 11802	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 35457.50
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. THOMAS TSAVERAS		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6847
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 63.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. THOMAS TSAVERAS		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 725 5TH AVENUE		Transaction ID : SB23.6848
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period 157.50
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 35678.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9036
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCMULLEN: SB23.7057]		Amount of Each Disbursement this Period 75.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9037
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCMULLEN: SB23.7057]		Amount of Each Disbursement this Period 74.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9028
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 20.80
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9029
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 78.25
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9030
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 74.38
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9031
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]		Amount of Each Disbursement this Period 20.80
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9013
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 205.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9014
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 33.91
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9015
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 77.57
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9016
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 51.98
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9017
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 4.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9018
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]		Amount of Each Disbursement this Period 52.83
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9032
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCENTEE: SB23.6732]		Amount of Each Disbursement this Period 60.79
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9033
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCENTEE: SB23.6732]		Amount of Each Disbursement this Period 44.19
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9038
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]		Amount of Each Disbursement this Period 68.48
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9039
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 41.79	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9040
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 75.22	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9041
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 8.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9042
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]		Amount of Each Disbursement this Period 21.95
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9043
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]		Amount of Each Disbursement this Period 44.12
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9044
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]		Amount of Each Disbursement this Period 126.77
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9045
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [POWERS: SB23.6783]	Amount of Each Disbursement this Period 49.68
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9024
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCAVIANO: SB23.6649]	Amount of Each Disbursement this Period 27.55
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9025
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCAVIANO: SB23.6649]	Amount of Each Disbursement this Period 33.37
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9026
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 32.91	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCAVIANO: SB23.6649]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9027
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 52.39	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [SCAVIANO: SB23.6649]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9046
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 10.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [DECK: SB23.7394]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9019
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 77.15
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9020
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 74.77
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9021
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 8.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9022
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 202.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9023
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6878]		Amount of Each Disbursement this Period 69.81
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9034
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCENTEE: SB23.6734]		Amount of Each Disbursement this Period 42.66
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1455 MARKET STREET 4TH FL		Transaction ID : SB23.9035
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 26.83	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [MCENTEE: SB23.6734]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. GARY RICHARD UHER		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 123 MAMARONECK AVE. APT. 205		Transaction ID : SB23.6673
City MAMARONECK State NY Zip Code 10543	Amount of Each Disbursement this Period 2754.00	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. GARY RICHARD UHER		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 123 MAMARONECK AVE. APT. 205		Transaction ID : SB23.6671
City MAMARONECK State NY Zip Code 10543	Amount of Each Disbursement this Period 5376.00	
Purpose of Disbursement SECURITY SERVICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 8130.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. GARY RICHARD UHER

Full Name (Last, First, Middle Initial)

Mailing Address 123 MAMARONECK AVE. APT. 205

City MAMARONECK State NY Zip Code 10543

Purpose of Disbursement SECURITY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 08 / 11 / 2015

Transaction ID : SB23.6672

Amount of Each Disbursement this Period: 2000.00

Category/Type

B. GARY RICHARD UHER

Full Name (Last, First, Middle Initial)

Mailing Address 123 MAMARONECK AVE. APT. 205

City MAMARONECK State NY Zip Code 10543

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 08 / 25 / 2015

Transaction ID : SB23.6674

Amount of Each Disbursement this Period: 919.71

Category/Type 101

C. GARY RICHARD UHER

Full Name (Last, First, Middle Initial)

Mailing Address 123 MAMARONECK AVE. APT. 205

City MAMARONECK State NY Zip Code 10543

Purpose of Disbursement SECURITY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 08 / 25 / 2015

Transaction ID : SB23.7446

Amount of Each Disbursement this Period: 1495.00

Category/Type 101

Subtotal Of Receipts This Page (optional)..... 4414.71

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. GARY RICHARD UHER		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 123 MAMARONECK AVE. APT. 205		Transaction ID : SB23.6675
City MAMARONECK State NY Zip Code 10543	Amount of Each Disbursement this Period 295.88	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GARY RICHARD UHER		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 123 MAMARONECK AVE. APT. 205		Transaction ID : SB23.7447
City MAMARONECK State NY Zip Code 10543	Amount of Each Disbursement this Period 4780.00	
Purpose of Disbursement SECURITY SERVICES	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9056
City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period 573.10	
Purpose of Disbursement TRAVEL: AIR [HEWITT: SB23.6757]	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5075.88

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9057
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [GRISHAM: SB23.6816]		Amount of Each Disbursement this Period 25.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9048
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 350.60
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9049
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 426.10
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9050
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 9.99
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9051
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 82.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9052
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 86.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9053
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 0.00 426.10
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9054
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]		Amount of Each Disbursement this Period 0.00 393.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 233 S WICKER DR		Transaction ID : SB23.9055
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIRFARE [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 0.00 627.60
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9060
City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period 271.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9061
City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period 226.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9062
City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period 444.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9068
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6731]		Amount of Each Disbursement this Period 0.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9065
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [C&M: SB23.6896]		Amount of Each Disbursement this Period 0.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9066
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [C&M: SB23.6896]		Amount of Each Disbursement this Period 0.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9067
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIR [LAUDNER: SB23.6647]		Amount of Each Disbursement this Period 284.59
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9063
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIRFARE [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 426.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 233 SOUTH WACKER DRIVE		Transaction ID : SB23.9064
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL: AIRFARE [ASIT CONSULTING: SB23.6881]		Amount of Each Disbursement this Period 50.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED EXPRESS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 100 HARTSFIELD CENTER PKWY SUITE 700		Transaction ID : SB23.9070
City ATLANTA	State GA	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6734]		Amount of Each Disbursement this Period 980.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 610 5TH AVENUE		Transaction ID : SB23.7345
City NEW YORK	State NY	
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 980.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 610 5TH AVENUE		Transaction ID : SB23.9073
City NEW YORK	State NY	
Purpose of Disbursement POSTAGE [LAUDNER: SB23.6643]		Amount of Each Disbursement this Period 6.35
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 980.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 610 5TH AVENUE		Transaction ID : SB23.7346
City NEW YORK	State NY	
Zip Code 10020	Purpose of Disbursement POSTAGE	Amount of Each Disbursement this Period 980.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 610 5TH AVENUE		Transaction ID : SB23.7347
City NEW YORK	State NY	
Zip Code 10020	Purpose of Disbursement POSTAGE	Amount of Each Disbursement this Period 4900.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 55 GLENLAKE PARKWAY		Transaction ID : SB23.9082
City ATLANTA	State GA	
Zip Code 30328	Purpose of Disbursement DELIVERY SERVICES [GRISHAM: SB23.6815]	Amount of Each Disbursement this Period 479.76
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5880.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 55 GLENLAKE PARKWAY		Transaction ID : SB23.9080
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period 267.63	
Purpose of Disbursement DELIVERY SERVICES [EPLY: SB23.6707]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 55 GLENLAKE PARKWAY		Transaction ID : SB23.9079
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period 131.80	
Purpose of Disbursement DELIVERY SERVICES [GEORGEVITS: SB23.6618]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 55 GLENLAKE PARKWAY		Transaction ID : SB23.9081
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period 771.13	
Purpose of Disbursement DELIVERY SERVICE [KELLER: SB23.6806]	Category/Type	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9128
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 332.00	
Purpose of Disbursement TRAVEL: AIRFARE [MCMULLEN: SB23.7057]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9129
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 361.27	
Purpose of Disbursement TRAVEL: AIRFARE [MCMULLEN: SB23.7057]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9121
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 430.10	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9122
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 430.10	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9123
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9124
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 440.10	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... → 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9125
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 860.20	
Purpose of Disbursement TRAVEL: AIR [GREEN MONSTER: SB23.7033]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9126
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [GREEN MONSTER: SB23.7033]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9131
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement TRAVEL: AIR [DECK: SB23.7393]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9087
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: TRANSACTION FEE [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9088
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9089
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 296.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9090
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 456.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9091
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 440.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9092
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 273.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9093
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 438.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9094
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 47.00	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9095
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 440.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9096
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 241.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6877]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9130
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement TRAVEL: AIR [GRISHAM: SB23.6816]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9119
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement TRAVEL: TRANSACTION FEE [UHER: SB23.6674]	Candidate Name Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House Disbursement For: 2016 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼		
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9097
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	Category/ Type

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9098
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	Category/ Type

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9099
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	Category/ Type

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9100
City TEMPE	State AZ	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 22.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9101
City TEMPE	State AZ	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 22.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9102
City TEMPE	State AZ	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 22.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9103
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]	Amount of Each Disbursement this Period 22.00
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9104
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Amount of Each Disbursement this Period 210.10
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9105
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Amount of Each Disbursement this Period 210.10
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9106
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9107
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9108
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement TRAVEL: BAGGAGE [AMEX: SB23.6878]	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9109
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Amount of Each Disbursement this Period 435.10
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9110
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Amount of Each Disbursement this Period 55.00
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9111
City TEMPE	State AZ	
Zip Code 85281	Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Amount of Each Disbursement this Period 174.60
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9112
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 271.60	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9113
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9114
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9115
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9116
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 435.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9117
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement TRAVEL: FEE [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9118
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 281.10	
Purpose of Disbursement TRAVEL: AIR [AMEX: SB23.6878]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9127
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 574.10	
Purpose of Disbursement TRAVEL: AIR [MCENTEE: SB23.6734]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 111 W RIO SALADO PKWY		Transaction ID : SB23.9120
City TEMPE State AZ Zip Code 85281	Amount of Each Disbursement this Period 499.00	
Purpose of Disbursement TRAVEL: AIRFARE [FLYNN: SB23.6686]	Candidate Name Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9167
City WASHINGTON	State DC	
Purpose of Disbursement DELIVERY SERVICES [GOERTZ: SB23.6840]		Amount of Each Disbursement this Period 16.42
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9135
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 5.44
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9136
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]		Amount of Each Disbursement this Period 7.33
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9137
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Category/ Type	Amount of Each Disbursement this Period 12.72
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9138
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Category/ Type	Amount of Each Disbursement this Period 11.78
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9139
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Category/ Type	Amount of Each Disbursement this Period 11.30
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9140
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 0.00
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9141
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 5.05
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9142
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 5.23
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9143
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 10.10
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9144
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 13.37
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9145
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 11.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9146
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 7.55
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9147
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 11.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9148
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 11.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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**SCHEDULE B-P
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9149
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 5.25
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9150
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6878]	Zip Code 20024	Amount of Each Disbursement this Period 11.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9159
City WASHINGTON	State DC	
Purpose of Disbursement DELIVERY SERVICES [LAUDNER: SB23.6646]	Zip Code 20024	Amount of Each Disbursement this Period 6.70
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9162
City WASHINGTON	State DC	
Purpose of Disbursement DELIVERY SERVICES [MCENTEE: SB23.6733]	Zip Code 20024	Amount of Each Disbursement this Period 21.66
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9163
City WASHINGTON	State DC	
Purpose of Disbursement DELIVERY SERVICES [MCENTEE: SB23.6733]	Zip Code 20024	Amount of Each Disbursement this Period 21.66
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9164
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [MCENTEE: SB23.6734]	Zip Code 20024	Amount of Each Disbursement this Period 16.12
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9165
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [MCENTEE: SB23.6734]	Zip Code 20024	Amount of Each Disbursement this Period 5.54
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9156
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [GEORGEVITS: SB23.6618]	Zip Code 20024	Amount of Each Disbursement this Period 4.73
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9151
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6879]	Zip Code 20024	Amount of Each Disbursement this Period 3.30
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9152
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6879]	Category/ Type	Amount of Each Disbursement this Period 1.25
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9153
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6879]	Category/ Type	Amount of Each Disbursement this Period 1.65
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9154
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [AMEX: SB23.6879]	Category/ Type	Amount of Each Disbursement this Period 22.82
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9160
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE [HULSIZER: SB23.6725]	Zip Code 20024	Amount of Each Disbursement this Period 9.80
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 470 LENFANT PLZ SW STE 604		Transaction ID : SB23.9166
City WASHINGTON	State DC	
Purpose of Disbursement DELIVERY SERVICE [KELLER: SB23.6806]	Zip Code 20024	Amount of Each Disbursement this Period 9.16
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address PO BOX 15124		Transaction ID : SB23.7349
City ALBANY	State NY	
Purpose of Disbursement UTILITIES	Zip Code 12212	Amount of Each Disbursement this Period 247.97
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 247.97

Total This Period (last page this line number only).....

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address PO BOX 15124		Transaction ID : SB23.7350
City ALBANY	State NY	
Purpose of Disbursement UTILITIES	Zip Code 12212	Amount of Each Disbursement this Period 360.17
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1 VERIZON WAY		Transaction ID : SB23.9171
City BASKING RIDGE	State NJ	
Purpose of Disbursement MOBILE PHONE EXPENSE [AMEX: SB23.6878]	Zip Code 07920	Amount of Each Disbursement this Period 261.29
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO BOX 15124		Transaction ID : SB23.7351
City ALBANY	State NY	
Purpose of Disbursement UTILITIES	Zip Code 12212	Amount of Each Disbursement this Period 469.41
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 829.58

Total This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. VOLUSION

Full Name (Last, First, Middle Initial)

Mailing Address 1835 KRAMER LANE #100

City AUSTIN State TX Zip Code 78758

Purpose of Disbursement SOFTWARE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 07 / 2015

Transaction ID : SB23.7353

Amount of Each Disbursement this Period: 1200.00

Category/Type

B. W.B.MASON

Full Name (Last, First, Middle Initial)

Mailing Address 50 CENTRE ST

City BROCKTON State MA Zip Code 02301

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2015

Transaction ID : SB23.7356

Amount of Each Disbursement this Period: 442.29

Category/Type

C. W.B.MASON

Full Name (Last, First, Middle Initial)

Mailing Address 50 CENTRE ST

City BROCKTON State MA Zip Code 02301

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2015

Transaction ID : SB23.7357

Amount of Each Disbursement this Period: 206.32

Category/Type

Subtotal Of Receipts This Page (optional)..... 1848.61

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. W.B.MASON		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 50 CENTRE ST		Transaction ID : SB23.7358
City BROCKTON	State MA	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 587.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. W.B.MASON		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 50 CENTRE ST		Transaction ID : SB23.7359
City BROCKTON	State MA	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 348.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. W.B. MASON CO., INC.		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address PO BOX 981101		Transaction ID : SB23.7355
City BOSTON	State MA	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 977.43
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 1913.27

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9193
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6616]		Amount of Each Disbursement this Period 36.86
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9194
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6616]		Amount of Each Disbursement this Period 56.08
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9195
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6616]		Amount of Each Disbursement this Period 56.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9204
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [LAUDNER: SB23.6644]		Amount of Each Disbursement this Period 72.16
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9196
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6617]		Amount of Each Disbursement this Period 80.32
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9207
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [KELLER: SB23.6805]		Amount of Each Disbursement this Period 15.80
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9202
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [NAGEL: SB23.6630]		Amount of Each Disbursement this Period 42.03
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9203
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [HUPKE: SB23.6640]		Amount of Each Disbursement this Period 12.35
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9205
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [EPLEY: SB23.6707]		Amount of Each Disbursement this Period 201.40
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9206
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [EPLEY: SB23.6707]		Amount of Each Disbursement this Period 57.75
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9197
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 31.13
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9198
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 210.00
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9199
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 22.53
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9200
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 18.96
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 702 SW 8TH ST		Transaction ID : SB23.9201
City BENTONVILLE	State AR	
Purpose of Disbursement OFFICE SUPPLIES [GEORGEVITS: SB23.6618]		Amount of Each Disbursement this Period 198.42
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 1196 / 1212

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JONATHAN WARDELL		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 43 ROCKMERE AVE		Transaction ID : SB23.6736
City OLD GREENWICH	State CT	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) B. JONATHAN WARDELL		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 43 ROCKMERE AVE		Transaction ID : SB23.6738
City OLD GREENWICH	State CT	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 43.28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) C. JONATHAN WARDELL		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 43 ROCKMERE AVE		Transaction ID : SB23.6739
City OLD GREENWICH	State CT	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 53.77
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Subtotal Of Receipts This Page (optional)..... 1397.05

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JONATHAN WARDELL		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 43 ROCKMERE AVE		Transaction ID : SB23.6737
City OLD GREENWICH	State CT	
Purpose of Disbursement ADMINISTRATIVE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. JIMMY WASHINGTON		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6716
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) C. WEISERMAZARS, LLP		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 60 CROSSWAYS PARK DRIVE WEST SUITE 301		Transaction ID : SB23.7362
City WOODBURY	State NY	
Purpose of Disbursement ACCOUNTING SERVICES	Candidate Name	Amount of Each Disbursement this Period 7500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 9050.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WEISERMAZARS, LLP		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 60 CROSSWAYS PARK DRIVE WEST SUITE 301		Transaction ID : SB23.7363
City WOODBURY	State NY	
Purpose of Disbursement ACCOUNTING SERVICES	Candidate Name	Amount of Each Disbursement this Period 1100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. WEISERMAZARS LLP		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 60 CROSSWAYS PARK DRIVE WEST SUITE 301		Transaction ID : SB23.7361
City WOODBURY	State NY	
Purpose of Disbursement ACCOUNTING SERVICES	Candidate Name	Amount of Each Disbursement this Period 10000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. WESTIN HOTEL		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 5400 W CENTURY BLVD		Transaction ID : SB23.9225
City LOS ANGELES	State CA	
Purpose of Disbursement TRAVEL: LODGING [TELION: SB23.7322]	Candidate Name	Amount of Each Disbursement this Period 554.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 11100.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WHITE CLIFF REALTY		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address PO BOX 1015		Transaction ID : SB23.7364
City MILFORD	State NH	
Purpose of Disbursement RENT	Candidate Name	Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. WHITE CLIFF REALTY		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address PO BOX 1015		Transaction ID : SB23.7365
City MILFORD	State NH	
Purpose of Disbursement RENT	Candidate Name	Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. WHITE CLIFF REALTY		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address PO BOX 1015		Transaction ID : SB23.7366
City MILFORD	State NH	
Purpose of Disbursement RENT	Candidate Name	Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 7500.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOSHUA WHITEHOUSE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 45 FOXTROT DRIVE		Transaction ID : SB23.6744
City FARMINGTON State NH Zip Code 03835	Amount of Each Disbursement this Period 1695.88	
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Category/Type 101	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JOSHUA WHITEHOUSE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 45 FOXTROT DRIVE		Transaction ID : SB23.7455
City FARMINGTON State NH Zip Code 03835	Amount of Each Disbursement this Period 3600.00	
Purpose of Disbursement FIELD CONSULTING	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C. JOSHUA WHITEHOUSE		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 45 FOXTROT DRIVE		Transaction ID : SB23.9293
City FARMINGTON State NH Zip Code 03835	Amount of Each Disbursement this Period 1209.46	
Purpose of Disbursement TRAVEL: MILEAGE [WHITEHOUSE: SB23.6744]	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... **5295.88**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. JOSHUA WHITEHOUSE		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 45 FOXTROT DRIVE		Transaction ID : SB23.6743
City FARMINGTON	State NH	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 7200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. JOHN WILSON		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 15524 LAUREL RIDGE ROAD		Transaction ID : SB23.7450
City MONTCLAIR	State VA	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	Amount of Each Disbursement this Period 1070.00
Office 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: _____	Category/Type 101	

Full Name (Last, First, Middle Initial) C. MATTHEW WINDOM		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 20118 N. 67TH AVE 300-443		Transaction ID : SB23.6771
City GLENDALE	State AZ	
Purpose of Disbursement SECURITY SERVICES	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 8520.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

A. WINNACUNNET HIGH SCHOOL

Full Name (Last, First, Middle Initial)

Mailing Address 1 ALUMNI DR.

City HAMPTON State NH Zip Code 03842

Purpose of Disbursement FACILITY RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 08 / 17 / 2015

Transaction ID : SB23.7368

Amount of Each Disbursement this Period: 700.00

Category/Type

B. WINNACUNNET HIGH SCHOOL

Full Name (Last, First, Middle Initial)

Mailing Address 1 ALUMNI DR.

City HAMPTON State NH Zip Code 03842

Purpose of Disbursement FACILITY RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 09 / 23 / 2015

Transaction ID : SB23.7369

Amount of Each Disbursement this Period: 1400.00

Category/Type

C. WIZBANG SOLUTIONS, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 6747 E. 50TH AVENUE

City COMMERCE CITY State CO Zip Code 80022

Purpose of Disbursement PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 07 / 06 / 2015

Transaction ID : SB23.7372

Amount of Each Disbursement this Period: 8436.22

Category/Type

Subtotal Of Receipts This Page (optional)..... 10536.22

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7373
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Amount of Each Disbursement this Period 604.56
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7374
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Amount of Each Disbursement this Period 2638.33
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7375
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Amount of Each Disbursement this Period 1736.50
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4979.39

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7376
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES	Candidate Name	Amount of Each Disbursement this Period 9,999,999.99 499.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7370
City COMMERCE CITY	State CO	
Purpose of Disbursement COLLATERAL: BUMPER STICKERS	Candidate Name	Amount of Each Disbursement this Period 9,999,999.99 12808.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7371
City COMMERCE CITY	State CO	
Purpose of Disbursement DIRECT MAIL: PRINTING AND POSTAGE	Candidate Name	Amount of Each Disbursement this Period 9,999,999.99 1750.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Subtotal Of Receipts This Page (optional)..... 15058.10

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7377
City COMMERCE CITY	State CO	
Zip Code 80022	Purpose of Disbursement PRINTING AND DESIGN SERVICES	Amount of Each Disbursement this Period 249.24
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7378
City COMMERCE CITY	State CO	
Zip Code 80022	Purpose of Disbursement PRINTING AND DESIGN SERVICES	Amount of Each Disbursement this Period 6259.72
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7379
City COMMERCE CITY	State CO	
Zip Code 80022	Purpose of Disbursement PRINTING AND DESIGN SERVICES	Amount of Each Disbursement this Period 90.14
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... → 6599.10

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7380
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES	Zip Code 80022	Amount of Each Disbursement this Period 3282.16
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7381
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES	Zip Code 80022	Amount of Each Disbursement this Period 293.04
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WIZBANG SOLUTIONS, INC.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 6747 E. 50TH AVENUE		Transaction ID : SB23.7382
City COMMERCE CITY	State CO	
Purpose of Disbursement PRINTING AND DESIGN SERVICES	Zip Code 80022	Amount of Each Disbursement this Period 2652.20
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 6227.40

Total This Period (last page this line number only)..... 4033650.53

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1207 / 1212

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. ERNIE BOCH		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 190 SUMNER STREET		Transaction ID : SB28A.7398
City NORWOOD State MA Zip Code 02062	Amount of Each Disbursement this Period 84236.80	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) B. RICHARD PAHUCKI		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 58 VIRGINIA AVE.		Transaction ID : SB28A.7439
City SHARPSBURG State VA Zip Code 30277	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C. MARK ROGERS		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 20 SCENIC DRIVE		Transaction ID : SB28A.7437
City OLMSTED FALLS State OH Zip Code 44138	Amount of Each Disbursement this Period 36.78	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type 101	
Candidate Name		
Office 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:		

Subtotal Of Receipts This Page (optional)..... 84348.58

Total This Period (last page this line number only)..... 84348.58

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial) A. COLORADO REPUBLICAN COMMITTEE		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 5950 S. WILLOW DRIVE SUITE 302		Transaction ID : SB24.9314
City GREENWOOD VILLAGE State CO Zip Code 80111	Amount of Each Disbursement this Period \$ 50.00	
Purpose of Disbursement EVENT REGISTRATION FEE	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) B. SOUTH CAROLINA REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address P.O. BOX 12373		Transaction ID : SB24.9312
City COLUMBIA State SC Zip Code 29211	Amount of Each Disbursement this Period \$ 40000.00	
Purpose of Disbursement BALLOT ACCESS FEE	Category/Type 101	
Candidate Name		
Office 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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID :
City State Zip Code	Amount of Each Disbursement this Period \$	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office 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:		

Subtotal Of Receipts This Page (optional).....→ \$ 40050.00

Total This Period (last page this line number only).....→ \$ 40050.00

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Transaction ID : **SC/12.4108**

LOAN SOURCE Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

[PERSONAL FUNDS]

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
725 FIFTH AVENUE

City	State	ZIP Code
NEW YORK	NY	10022

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
76500.00	0.00	76500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 08 / Y 2015	M / D / Y 12/31/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Transaction ID : **SC/12.4109**

LOAN SOURCE Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

[PERSONAL FUNDS]

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
725 FIFTH AVENUE

City	State	ZIP Code
NEW YORK	NY	10022

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
216150.00	0.00	216150.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 10 / Y 2015	M / D / Y 12/31/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Transaction ID : **SC/12.4110**

LOAN SOURCE Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

[PERSONAL FUNDS]

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
725 FIFTH AVENUE

City	State	ZIP Code
NEW YORK	NY	10022

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
430450.00	0.00	430450.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 14 / Y 2015	M / D / Y 12/31/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-P LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Transaction ID : **SC/12.4111**

LOAN SOURCE Full Name (Last, First, Middle Initial)
DONALD J. TRUMP

[PERSONAL FUNDS]

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
725 FIFTH AVENUE

City	State	ZIP Code
NEW YORK	NY	10022

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1081647.23	0.00	1081647.23

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 16 / Y 2015	M / D / Y 12/31/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.