

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cruz for President**

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

Mailing Address 2651 CRESCENT HILL DR

City State Zip Code  
MEBANE NC 27302-9162

FEC ID 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 : SA17.375737**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**HOWARD TUGGEY**

Mailing Address

City State Zip Code  
TX

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
0.00

**Transaction ID : SA17.304674A**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
200.00

CHARGED BACK \$200.00 ON 05/15/2015

**C.** Full Name (Last, First, Middle Initial)  
**HOWARD TUGGEY**

Mailing Address

City State Zip Code  
TX

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
0.00

**Transaction ID : SA17.304674B**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
-200.00

CHARGED BACK

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

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