

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Chris Christie for President, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEON MARK WAGNER**

Mailing Address 860 UNITED NATIONS PLAZA APT. 37A

City	State	Zip Code
NY	NY	10017-1823

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LW PARTNERS	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.44002**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CATHRYN J. WALKER**

Mailing Address PO BOX 4452

City	State	Zip Code
EL DORADO HILLS	CA	95762-0018

FEC ID number of contributing federal political committee.

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 ▼

**Transaction ID : SA17.42530**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. CRAIG V. WALKER**

Mailing Address P.O. BOZ 4452

City	State	Zip Code
EL DORADO HILLS	CA	95762-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AMERICAN RIVER AG INC.	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.42559**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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