

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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

KUESTER, DENNIS, , ,

Mailing Address 10 SEAGATE DR. 3S

City
NAPLES

State
FL

Zip Code
34103-2467

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 : SA17.1492301B

Date of Receipt

MM / DD / YYYY
03 / 29 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

-2700.00

Memo Item

REATTRIBUTION TO SPOUSE

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

KUESTER, SANDRA, , ,

Mailing Address 10 SEAGATE DR. 3S

City
NAPLES

State
FL

Zip Code
34103-2467

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 : SA17.1493799

Date of Receipt

MM / DD / YYYY
03 / 29 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Memo Item

REATTRIBUTION FROM SPOUSE

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

KUESTERSTEFFEN, ROBERT, B., MR.,

Mailing Address 301 NEOSHO STREET

City
HUMBOLDT

State
KS

Zip Code
66748-1409

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 ▼

270.00

Transaction ID : SA17.1458486

Date of Receipt

MM / DD / YYYY
03 / 22 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

35.00

Memo Item

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

35.00

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