

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)

ALONZO, ELIZABETH, , ,

Mailing Address PO BOX 255

City

EVENING SHADE

State

AR

Zip Code

72532

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNI1ST CORP

Occupation

MAINTANCE

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.75

Transaction ID : SA17A.41239

Date of Receipt

MM / DD / YYYY
06 / 30 / 2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

ALPAUGH, VICTORIA, , ,

Mailing Address 8375 OLD STABLE RD

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Transaction ID : SA17A.54838

Date of Receipt

MM / DD / YYYY
04 / 30 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

ALPAUGH, VICTORIA, , ,

Mailing Address 8375 OLD STABLE RD

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

Transaction ID : SA17A.54839

Date of Receipt

MM / DD / YYYY
05 / 31 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

205.00

Total This Period (last page this line number only)