

# **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)

**ARMSTRONG, MICHAEL, J., MR., JR.**

Mailing Address 3231 N DECATUR BLVD

STE 110

City

LAS VEGAS

State

NV

Zip Code

89130-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

426.25

**Transaction ID : SA17A.42451**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 11 / 2019

Amount of Each Receipt this Period

25.00

☐

Memo Item

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

**ARMSTRONG, NANCY, , ,**

Mailing Address 131 MEADOW RD

City

RIVERSIDE

State

CT

Zip Code

06878

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

EXECUTIVE PRODUCER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.28312**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2019

Amount of Each Receipt this Period

500.00

☐

Memo Item

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

**ARMSTRONG, VICKIE, , ,**

Mailing Address 4544 DRAKE ST

City

FAIRBANKS

State

AK

Zip Code

99709

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 ▼

570.00

**Transaction ID : SA17A.18282**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 07 / 2019

Amount of Each Receipt this Period

25.00

☐

Memo Item

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

550.00

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