

# **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)**

**BAYS, LINDA, , ,**

Mailing Address 7601 KNIGHTWING CIR

City

FORT MYERS

State

FL

Zip Code

33912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GIASSOCIATESSWFL

Occupation  
REGISTERED NURSE

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

685.00

**Transaction ID : SA17A.106177**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**BAYSINGER, LAWRENCE, , ,**

Mailing Address 38 HENRY RD

City

GILLETTE

State

WY

Zip Code

82718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
OWNER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.25

**Transaction ID : SA17A.21170**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 11 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**BAZAN, LUCAS, , ,**

Mailing Address 18819 PARK HARBOR DR

City

HOUSTON

State

TX

Zip Code

77084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAZAN CONSULTING INC

Occupation  
ENGINEER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.77729**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 23 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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