

# **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)

**BECK, ROBERT, N., MR.,**

Mailing Address PO BOX 467

City  
THOMPSONS STATION

State  
TN

Zip Code  
37179

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PREMIERE PROPERTIES GROUP

Occupation  
REALTOR

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.25

**Transaction ID : SA17A.44240**

Date of Receipt

**04** / **30** / **2019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**BECK, ROBERT, N., MR.,**

Mailing Address PO BOX 467

City  
THOMPSONS STATION

State  
TN

Zip Code  
37179

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PREMIERE PROPERTIES GROUP

Occupation  
REALTOR

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

297.75

**Transaction ID : SA17A.44241**

Date of Receipt

**05** / **18** / **2019**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**BECK, RONALD, , ,**

Mailing Address 14 SILVER OAKS LN  
8

City  
EDWARDSVILLE

State  
IL

Zip Code  
62025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BECK AND CO

Occupation  
INSURANCE

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.67485**

Date of Receipt

**04** / **13** / **2019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

135.00

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