

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 7371 / 77920

<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)**

**FILKINS, GAIL, , ,**

Mailing Address 837 E C ST

City  
CASPER

State  
WY

Zip Code  
82601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAREGIVER

Occupation  
CAREGIVER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.59363**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**FILKINS, PAMELA, , ,**

Mailing Address 101 BURNHAM RD

City  
NEWNAN

State  
GA

Zip Code  
30263

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 ▼

166.50

**Transaction ID : SA17A.45294**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 08 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**FILKINS, PAMELA, , ,**

Mailing Address 101 BURNHAM RD

City  
NEWNAN

State  
GA

Zip Code  
30263

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 ▼

270.25

**Transaction ID : SA17A.45295**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

185.00

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