

# **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)

FUHRMAN, JOHN, , ,

Mailing Address 25923 47TH AVENUE CT E

City  
GRAHAM

State  
WA

Zip Code  
98338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FUHRMAN LAW

Occupation  
ATTORNEY

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1542.75

**Transaction ID : SA17A.88987**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

FUHRMAN, JOHN, , ,

Mailing Address 25923 47TH AVENUE CT E

City  
GRAHAM

State  
WA

Zip Code  
98338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FUHRMAN LAW

Occupation  
ATTORNEY

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1642.75

**Transaction ID : SA17A.88988**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

FUJIWARA, GAIL, AIKO, ,

Mailing Address 498 CALIBRE ST

City  
FAIRHOPE

State  
AL

Zip Code  
36532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BBVA

Occupation  
PT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

123.01

**Transaction ID : SA17A.44416**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 30 / 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) .....