

# **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)**

**GARCIA, LOUISE, C, MS.,**

Mailing Address 110 DUNBAR ESTATES DR

City

FRIENDSWOOD

State

TX

Zip Code

77546

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 ▼

202.75

**Transaction ID : SA17A.39025**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 05 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**GARCIA, MANUEL, , MR.,**

Mailing Address 11364 NW 68TH ST

City

DORAL

State

FL

Zip Code

33178

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCORP GROUP

Occupation  
MANAGER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1376.25

**Transaction ID : SA17A.35969**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 16 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**GARCIA, MARIANELLA, , ,**

Mailing Address 9421 VERNON DR

City

GREAT FALLS

State

VA

Zip Code

22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

545.00

**Transaction ID : SA17A.18331**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 09 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

150.00

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