

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)

HOWELL, BOB, , ,

Mailing Address 133 N GRACE ST

City
LANSING

State
MI

Zip Code
48917

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 ▼

275.00

Transaction ID : SA17A.23156

Date of Receipt

M M / D D / Y Y Y Y
06 / 17 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

HOWELL, CAROL, , ,

Mailing Address 130 BRICK CHURCH RD

City
DAVIDSONVILLE

State
MD

Zip Code
21035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
DOG BREEDER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Transaction ID : SA17A.20051

Date of Receipt

M M / D D / Y Y Y Y
06 / 14 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

HOWELL, CHRISTINE, , ,

Mailing Address 924 CREPE MYRTLE ST

City
COLLEGE STATION

State
TX

Zip Code
77845

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIP KID

Occupation
TEACHER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

346.00

Transaction ID : SA17A.109882

Date of Receipt

M M / D D / Y Y Y Y
05 / 10 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

85.00

Total This Period (last page this line number only)