

# **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)**

**KING, MARTHA, , ,**

Mailing Address 803 2ND ST

City  
LEAGUE CITY

State  
TX

Zip Code  
77573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LICENSED MASSAGE THERAPIST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

391.25

**Transaction ID : SA17A.81438**

Date of Receipt

**04 / 25 / 2019**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**KING, MARTHA, , ,**

Mailing Address 803 2ND ST

City  
LEAGUE CITY

State  
TX

Zip Code  
77573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LICENSED MASSAGE THERAPIST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.25

**Transaction ID : SA17A.81439**

Date of Receipt

**05 / 25 / 2019**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**KING, MARTHA, , ,**

Mailing Address 803 2ND ST

City  
LEAGUE CITY

State  
TX

Zip Code  
77573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LICENSED MASSAGE THERAPIST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

461.25

**Transaction ID : SA17A.81440**

Date of Receipt

**06 / 25 / 2019**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

105.00

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