

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)

KNOWLES, KEVIN, , ,

Mailing Address 1707 ARMAGNEA ST

City

CARSON CITY

State

NV

Zip Code

89701

FEC ID number of contributing
federal political committee.

C

Name of Employer

KNIGHT TRANSPORTATION

Occupation

TRUCK DRIVER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Transaction ID : SA17A.30432

Date of Receipt

M M / D D / Y Y Y Y

06

25

2019

Amount of Each Receipt this Period

50.00

☐

Memo Item

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

KNOWLES, LEOLA, , ,

Mailing Address 8224 COOPER DR

City

PENSACOLA

State

FL

Zip Code

32534

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 ▼

250.00

Transaction ID : SA17A.24091

Date of Receipt

M M / D D / Y Y Y Y

06

18

2019

Amount of Each Receipt this Period

250.00

☐

Memo Item

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

KNOWLES, NIKKI, , ,

Mailing Address 1790 LINCOLN ST

City

PORTAGE

State

IN

Zip Code

46368

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 ▼

458.72

Transaction ID : SA17A.22345

Date of Receipt

M M / D D / Y Y Y Y

06

17

2019

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

400.00

Total This Period (last page this line number only)