

# **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)**

KYLE, JOHN, , ,

Mailing Address 6514 CLUBVIEW DR

City  
WESTFIELD CENTER

State  
OH

Zip Code  
44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DELTA AIR LINES

Occupation  
PILOT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1078.58

**Transaction ID : SA17A.69373**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

KYLE, JOHN, , ,

Mailing Address 6514 CLUBVIEW DR

City  
WESTFIELD CENTER

State  
OH

Zip Code  
44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DELTA AIR LINES

Occupation  
PILOT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1103.58

**Transaction ID : SA17A.69374**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

KYLE, JOHN, , ,

Mailing Address 6514 CLUBVIEW DR

City  
WESTFIELD CENTER

State  
OH

Zip Code  
44251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DELTA AIR LINES

Occupation  
PILOT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1128.58

**Transaction ID : SA17A.69375**

Date of Receipt

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

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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