

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)

MINARDI, JEANNIE, , ,

Mailing Address 1011 WALNUT RD

City

CHARLESTON

State

WV

Zip Code

25314

FEC ID number of contributing
federal political committee.

C

Name of Employer

MINARDI EYE CENTER

Occupation

OFFICE MANAGER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.99907

Date of Receipt

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

17

2019

Amount of Each Receipt this Period

500.00

☐

Memo Item

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

MINARDI, JEANNIE, , ,

Mailing Address 1011 WALNUT RD

City

CHARLESTON

State

WV

Zip Code

25314

FEC ID number of contributing
federal political committee.

C

Name of Employer

MINARDI EYE CENTER

Occupation

OFFICE MANAGER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Transaction ID : SA17A.99908

Date of Receipt

M M / D D / Y Y Y Y
06 / 28 / 2019

28

2019

Amount of Each Receipt this Period

250.00

☐

Memo Item

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

MINARDIMD, LAWRENCE, , ,

Mailing Address 6 QUARRY RDG

City

CHARLESTON

State

WV

Zip Code

25304

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Transaction ID : SA17A.65682

Date of Receipt

M M / D D / Y Y Y Y
04 / 13 / 2019

13

2019

Amount of Each Receipt this Period

75.00

☐

Memo Item

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

825.00

Total This Period (last page this line number only)