

# **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)**

**PEARSON, GINGER, , ,**

Mailing Address 6606 TRAJAN DR.

City

ORANGEVALE

State

CA

Zip Code

95662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
STRUCTURAL STEEL, DATA ENTRY

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

179.50

**Transaction ID : SA17A.49620**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2019

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

**PEARSON, GINGER, , ,**

Mailing Address 6606 TRAJAN DR.

City

ORANGEVALE

State

CA

Zip Code

95662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
STRUCTURAL STEEL, DATA ENTRY

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

221.50

**Transaction ID : SA17A.49621**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2019

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

**PEARSON, JOANN, , ,**

Mailing Address 670 HENRY ST

City

DALTON

State

OH

Zip Code

44618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WALMART

Occupation  
CASHIER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

785.00

**Transaction ID : SA17A.105605**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 02 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

119.00

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