

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)

SALYERS, MICHAEL, , ,

Mailing Address 14206 LACAVERA DR

City
STERLING HEIGHTS

State
MI

Zip Code
48313

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOT EMPLOYED

Occupation
NOT EMPLOYED

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142.25

Transaction ID : SA17A.100700

Date of Receipt

MM / DD / YYYY
05 / 06 / 2019

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

SALYERS, MICHAEL, , ,

Mailing Address 14206 LACAVERA DR

City
STERLING HEIGHTS

State
MI

Zip Code
48313

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOT EMPLOYED

Occupation
NOT EMPLOYED

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

258.75

Transaction ID : SA17A.100701

Date of Receipt

MM / DD / YYYY
06 / 14 / 2019

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

SALZL, SUSAN, , ,

Mailing Address 4519 HUBBLE RD

City
CINCINNATI

State
OH

Zip Code
45247

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 ▼

244.00

Transaction ID : SA17A.12784

Date of Receipt

MM / DD / YYYY
04 / 05 / 2019

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

40.00

Total This Period (last page this line number only)