

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)

SMITH, PATRICIA, , MS.,

Mailing Address 1459 BOULDER CT

City

BOWLING GREEN

State

KY

Zip Code

42104-3024

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 ▼

362.50

Transaction ID : SA17A.12005

Date of Receipt

MM / DD / YYYY
05 / 23 / 2019

23

2019

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

SMITH, PATRICIA, , ,

Mailing Address 876 COUNTY ROAD 146

City

BURNS

State

WY

Zip Code

82053

FEC ID number of contributing
federal political committee.

C

Name of Employer

BAR S SERVICES

Occupation

OIL & GAS BUSINESS OWNER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2080.00

Transaction ID : SA17A.50827

Date of Receipt

MM / DD / YYYY
05 / 27 / 2019

27

2019

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

SMITH, PATRICIA, M, ,

Mailing Address 546 MONET DR

City

ROCKVILLE

State

MD

Zip Code

20850

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 ▼

272.50

Transaction ID : SA17A.105526

Date of Receipt

MM / DD / YYYY
05 / 29 / 2019

29

2019

Amount of Each Receipt this Period

10.00

☐

Memo Item

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

210.00

Total This Period (last page this line number only)