

# **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)

**STARR, HOWARD, , ,**

Mailing Address 3551 VINELAND AVE

City

ASHTABULA

State

OH

Zip Code

44004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

KIEWIT

Occupation

CONSTRUCTION

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

406.25

**Transaction ID : SA17A.43761**

Date of Receipt

**04** / **29** / **2019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**STARR, MARK, , ,**

Mailing Address 8436 NW 4TH PL

City

GAINESVILLE

State

FL

Zip Code

32607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

FLORIDA CREDIT UNION

Occupation

FINANCE

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

**Transaction ID : SA17A.94259**

Date of Receipt

**05** / **31** / **2019**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**STARR, MARK, , ,**

Mailing Address 8436 NW 4TH PL

City

GAINESVILLE

State

FL

Zip Code

32607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

FLORIDA CREDIT UNION

Occupation

FINANCE

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

**Transaction ID : SA17A.94260**

Date of Receipt

**06** / **30** / **2019**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

550.00

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