

# **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)**

**STREET, RYAN, , ,**

Mailing Address 10340 PINION TRAIL

City

ESCONDIDO

State

CA

Zip Code

92026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REALTOR

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.18360**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 09 / 2019

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**STREETER, JOHN, , ,**

Mailing Address PO BOX 171

City

KAYCEE

State

WY

Zip Code

82639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
OWNER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

513.83

**Transaction ID : SA17A.27747**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**STREHLOW, MICHAEL, , ,**

Mailing Address 127 BEAR DR

City

RICHLAND

State

WA

Zip Code

99352

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 ▼

206.50

**Transaction ID : SA17A.32351**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

1200.00

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