

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)

THOMAS, BERT, , ,

Mailing Address 8995 CYPRESS DR

City
THORNTON

State
CO

Zip Code
80229

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 ▼

260.00

Transaction ID : SA17A.49385

Date of Receipt

MM / DD / YYYY
05 / 01 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

THOMAS, BOB, , MR.,

Mailing Address 1056 RIVER RD

City
HAMILTON

State
NY

Zip Code
13346

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLGATE UNIVERSITY

Occupation
MAINTENANCE

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Transaction ID : SA17A.38765

Date of Receipt

MM / DD / YYYY
06 / 25 / 2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

THOMAS, BRIAN, , ,

Mailing Address 33353 CHERYL ST

City
CLINTON TOWNSHIP

State
MI

Zip Code
48035

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRUTRON

Occupation
MACHINE OPERATER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3520.00

Transaction ID : SA17A.94506

Date of Receipt

MM / DD / YYYY
04 / 30 / 2019

SEE REDESIGNATION

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

105.00

Total This Period (last page this line number only)