

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24910 / 77920

<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)

WASS, JAMES, , ,

Mailing Address 5303 60TH AVENUE

City  
RIVERDALE

State  
MD

Zip Code  
20737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JKW ASSOCIATES, LLC

Occupation  
BUSINESS PROCESS ANALYST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

269.00

**Transaction ID : SA17A.26118**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 22 / 2019

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

WASS, JAMES, , ,

Mailing Address 5303 60TH AVENUE

City  
RIVERDALE

State  
MD

Zip Code  
20737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JKW ASSOCIATES, LLC

Occupation  
BUSINESS PROCESS ANALYST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

304.00

**Transaction ID : SA17A.26119**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

WASSERBURGER, TOM, , ,

Mailing Address PO BOX 479

City  
LUSK

State  
WY

Zip Code  
82225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
MOTEL OWNER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

**Transaction ID : SA17A.25452**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

138.00

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