

# **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)**

WEST, JASON, , ,

Mailing Address 340 N HILTON DR

City

VAIL

State

AZ

Zip Code

85641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETAIL SPORTING GOODS

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

560.00

**Transaction ID : SA17A.45805**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 21 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

WEST, JASON, , ,

Mailing Address 340 N HILTON DR

City

VAIL

State

AZ

Zip Code

85641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETAIL SPORTING GOODS

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

595.00

**Transaction ID : SA17A.45806**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2019

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

WEST, JOE, , ,

Mailing Address 240 GREENWICH DR

City

CONWAY

State

SC

Zip Code

29526

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 ▼

459.26

**Transaction ID : SA17A.16941**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 30 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

170.00

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