

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)

BALINT, CINDIE, , ,

Mailing Address 6273 BRANCH HILL MIAMIVILLE RD

City
LOVELAND

State
OH

Zip Code
45140

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRIST HOSPITAL

Occupation
RN

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

171.25

Transaction ID : SA17A.86266

Date of Receipt

02 / 04 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

BALINT, CINDIE, , ,

Mailing Address 6273 BRANCH HILL MIAMIVILLE RD

City
LOVELAND

State
OH

Zip Code
45140

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRIST HOSPITAL

Occupation
RN

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

221.25

Transaction ID : SA17A.251592

Date of Receipt

03 / 01 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

BALISTRERI, ANDREW, A, MR.,

Mailing Address PO BOX 205

City
MEDFORD

State
NY

Zip Code
11763-0205

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUFFOLK COUNTY SHERIFFS OFFICE
NY

Occupation
DEPUTY SHERIFF

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Transaction ID : SA17A.18324

Date of Receipt

01 / 01 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

Total This Period (last page this line number only)