

# **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)  
**BENGRY, MARLANE, F., MS.,**  
Mailing Address 2098 SHEFFIELD PL

City  
BELLBROOK

State  
OH

Zip Code  
45305

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 ▼

128.75

**Transaction ID : SA17A.55504**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 01 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BENGRY, MARLANE, F., MS.,**  
Mailing Address 2098 SHEFFIELD PL

City  
BELLBROOK

State  
OH

Zip Code  
45305

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 ▼

153.75

**Transaction ID : SA17A.55505**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 09 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BENGRY, MARLANE, F., MS.,**  
Mailing Address 2098 SHEFFIELD PL

City  
BELLBROOK

State  
OH

Zip Code  
45305

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 ▼

231.25

**Transaction ID : SA17A.55506**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 16 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

100.00

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