

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18436 / 66158

<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)

**SHAFFER, TIMOTHY, , ,**

Mailing Address 4242 THORNCLIFF RD

City

BALTIMORE

State

MD

Zip Code

21236

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 ▼

105.00

**Transaction ID : SA17A.85607**

Date of Receipt

**03 / 01 / 2019**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**SHAHBAZI, KIM, , ,**

Mailing Address 114 CHRISTIE WAY

City

BEECH MOUNTAIN

State

NC

Zip Code

28604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MEDICAL CARE

Occupation  
FNP

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

65.15

**Transaction ID : SA17A.57519**

Date of Receipt

**02 / 04 / 2019**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**SHAHEEN, WILLIAM, , ,**

Mailing Address 16415 SAPPHIRE ST

City

WESTON

State

FL

Zip Code

33331

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PROFESSOR

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

217.17

**Transaction ID : SA17A.56347**

Date of Receipt

**01 / 17 / 2019**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

105.00

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