

# **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)

**BENSON, JOHN, , ,**

Mailing Address 751 MAPLE CREST DR

City

FRANKENMUTH

State

MI

Zip Code

48734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

FRANKENMUTH INSURANCE

Occupation

CEO

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.15905**

Date of Receipt

MM / DD / YYYY  
02 / 07 / 2020

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**BENSON, JOHN, T, ,**

Mailing Address 1112 BOLETUS DR

City

HENDERSON

State

NV

Zip Code

89011

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 ▼

200.00

**Transaction ID : SA17A.15909**

Date of Receipt

MM / DD / YYYY  
02 / 20 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA17A.4413]

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

**BENSON, JOHN, T, ,**

Mailing Address 1112 BOLETUS DR

City

HENDERSON

State

NV

Zip Code

89011

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 ▼

250.00

**Transaction ID : SA17A.15910**

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA17A.4422]

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

350.00

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