

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)

MCCUE, JOHN, , ,

Mailing Address 2961 WARWICK PARK

City
BULVERDE

State
TX

Zip Code
78163

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCCUE GROUP

Occupation
PARTNER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.104319

Date of Receipt

02 / 29 / 2020

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

MCCULLERS, AMBER, , ,

Mailing Address 2 NORTHWESTERN LTD

City
ARDMORE

State
OK

Zip Code
73401

FEC ID number of contributing
federal political committee.

C

Name of Employer
ODYSSEY HEALTHCARE

Occupation
PHYSICAL THERAPIST

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

45.00

Transaction ID : SA17A.104321

Date of Receipt

02 / 04 / 2020

EARMARKED THROUGH WINRED [SA17A.4386]

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

MCCULLEY, CHRIS, , ,

Mailing Address 448 3RD ST

City
HUDSON

State
IA

Zip Code
50643

FEC ID number of contributing
federal political committee.

C

Name of Employer
BILL COLWELL FORD

Occupation
PARTS MANAGER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Transaction ID : SA17A.104323

Date of Receipt

02 / 28 / 2020

EARMARKED THROUGH WINRED [SA17A.4437]

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

395.00

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