

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)

MCDUGAL, BRUCE, , ,

Mailing Address 230 E NORTH AVE

City
ANTIGO

State
WI

Zip Code
54409

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVAR

Occupation
MANAGER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Transaction ID : SA17A.53778

Date of Receipt

02 / 24 / 2020

EARMARKED THROUGH WINRED [SA17A.4416]

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

MCDUGAL, CAROL, , ,

Mailing Address 230 E NORTH AVE

City
ANTIGO

State
WI

Zip Code
54409

FEC ID number of contributing
federal political committee.

C

Name of Employer
MENOMINEE INDIAN TRIBE

Occupation
SPEECH PATHOLOGIST

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Transaction ID : SA17A.104465

Date of Receipt

02 / 27 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

MCDUGALL, ANGUS, , ,

Mailing Address 1327 OVERDALE DR

City
GILLETTE

State
WY

Zip Code
82718

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
LANDLORD

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.104467

Date of Receipt

02 / 06 / 2020

EARMARKED THROUGH WINRED [SA17A.4389]

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

325.00

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