

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15040 / 25823

<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)

MORSE, HAROLD, , ,

Mailing Address 59 SAWYER AVE

City  
ATKINSON

State  
NH

Zip Code  
03811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEWIS BUILDERS

Occupation  
MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.23377**

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2020

EARMARKED THROUGH WINRED [SA17A.4386]

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

MORSE, HAROLD, , ,

Mailing Address 59 SAWYER AVE

City  
ATKINSON

State  
NH

Zip Code  
03811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEWIS BUILDERS

Occupation  
MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1045.00

**Transaction ID : SA17A.23378**

Date of Receipt

MM / DD / YYYY  
02 / 10 / 2020

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

MORSE, HAROLD, , ,

Mailing Address 59 SAWYER AVE

City  
ATKINSON

State  
NH

Zip Code  
03811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEWIS BUILDERS

Occupation  
MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1295.00

**Transaction ID : SA17A.23379**

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2020

EARMARKED THROUGH WINRED [SA17A.4413]

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1295.00

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