

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)

ROBINSON, KAREN, , ,

Mailing Address 7075 POCO SENDA

City
RIVERSIDE

State
CA

Zip Code
92504

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 ▼

50.00

Transaction ID : SA17A.58618

Date of Receipt

02 / 17 / 2020

EARMARKED THROUGH WINRED [SA17A.4411]

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

ROBINSON, KATHY, , ,

Mailing Address 928 NORTH SAN FERNANDO BOULEVARD

City
BURBANK

State
CA

Zip Code
91504

FEC ID number of contributing
federal political committee.

C

Name of Employer
UBER

Occupation
DRIVER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Transaction ID : SA17A.116007

Date of Receipt

02 / 29 / 2020

EARMARKED THROUGH WINRED [SA17A.4437]

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

ROBINSON, KAYNE, B, ,

Mailing Address 2440 F15 BLVD BOX 75

City
MARENGO

State
IA

Zip Code
52301

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE GRASSLEY COMMITTEE INC

Occupation
CHAIRMAN AND MANAGING DIRECTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.116009

Date of Receipt

02 / 12 / 2020

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

400.00

Total This Period (last page this line number only)