

# **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)

**SANDERS, GLENN, , ,**

Mailing Address 11911 48TH ST NE

City

SAINT MICHAEL

State

MN

Zip Code

55376

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 ▼

42.00

**Transaction ID : SA17A.117745**

Date of Receipt

**02 / 05 / 2020**

EARMARKED THROUGH WINRED [SA17A.4386]

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

**SANDERS, JASON, , ,**

Mailing Address 3702 WASHINGTON ST

City

HOLLYWOOD

State

FL

Zip Code

33021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

JASON SANDERS MD PL LLC

Occupation

SURGEON

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

**Transaction ID : SA17A.35184**

Date of Receipt

**02 / 01 / 2020**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**SANDERS, JASON, , ,**

Mailing Address 3702 WASHINGTON ST

City

HOLLYWOOD

State

FL

Zip Code

33021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

JASON SANDERS MD PL LLC

Occupation

SURGEON

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.35185**

Date of Receipt

**02 / 04 / 2020**

EARMARKED THROUGH WINRED [SA17A.4386]

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

642.00

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