

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, 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 ▼

700.00

Transaction ID : SA17A.35186

Date of Receipt

02 / 11 / 2020

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

SANDERS, JOAN, , ,

Mailing Address 1198 SW 8TH AVE

City
ONTARIO

State
OR

Zip Code
97914

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 ▼

30.00

Transaction ID : SA17A.59395

Date of Receipt

02 / 27 / 2020

EARMARKED THROUGH WINRED [SA17A.4424]

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

SANDERS, JOAN, , ,

Mailing Address 1198 SW 8TH AVE

City
ONTARIO

State
OR

Zip Code
97914

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.59396

Date of Receipt

02 / 29 / 2020

EARMARKED THROUGH WINRED [SA17A.4437]

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

150.00

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