

# **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)**

**HEMSLEY, MICHAEL, , ,**

Mailing Address 303 SNAGSTEAD WAY

City  
PORT TOWNSEND

State  
WA

Zip Code  
98368

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NETJETS AVIATION

Occupation  
PILOT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

**Transaction ID : SA17A.878740**

Date of Receipt

**07 / 25 / 2017**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**HEMSLEY, MICHAEL, , ,**

Mailing Address 303 SNAGSTEAD WAY

City  
PORT TOWNSEND

State  
WA

Zip Code  
98368

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NETJETS AVIATION

Occupation  
PILOT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.829409**

Date of Receipt

**08 / 26 / 2017**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**HENDERSON, JAMES, , ,**

Mailing Address 1501 COPPERFIELD PKWY, APT 731

City  
COLLEGE STATION

State  
TX

Zip Code  
77845

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MEMORIAL HERMANN HEALTHCARE  
SYSTEM

Occupation  
IT PROJECT MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.819925**

Date of Receipt

**07 / 05 / 2017**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

145.00

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