

# **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)

Huckabee for President, Inc.

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

Gerrit Rozeboom

Mailing Address 2180 Mc 5020

City	State	Zip Code
St. Joe	AR	72675

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Trucker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.6356**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		24		2015

Amount of Each Receipt this Period

1000.00

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

Beth Rozenberg

Mailing Address 3 Hunters Run

City	State	Zip Code
Suffern	NY	10901

FEC ID number of contributing federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.39887**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Reattribution from Kenneth Rozenberg

Amount of Each Receipt this Period

2000.00

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

Kenneth Rozenberg

Mailing Address 3 Hunters Run

City	State	Zip Code
Suffern	NY	10901

FEC ID number of contributing federal political committee.

C

Name of Employer  
Centers for Specialty Care Group

Occupation  
Chief Executive Officer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

**Transaction ID : SA17A.5677**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

See Reattribution Below

Amount of Each Receipt this Period

4000.00

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

7000.00

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