

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**DONALD J. TRUMP FOR PRESIDENT, INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BURKHARDT, CRAIG, , ,</b> Mailing Address 4000 CATHEDRAL AVE., NW, UNIT 217B			<b>Transaction ID : SA17A.2429895</b> Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2016		
City WASHINGTON	State DC	Zip Code 20016	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C _____					
Name of Employer BARNES & THORNBURG LLP	Occupation LAWYER				
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1000.00			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>BURKHARDT, JOE, , ,</b> Mailing Address 15810 WOODLAWN BEACH DR			<b>Transaction ID : SA17A.2419574</b> Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2016		
City HICKORY CORNERS	State MI	Zip Code 49060	Amount of Each Receipt this Period _____ 250.00 <input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C _____					
Name of Employer BRONSON METHODIST HOSPITAL	Occupation ORTHOPAEDIC RECONSTRUCTIVE SURGEON				
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>BURKHART, MATTHEW, , ,</b> Mailing Address 8086 BACHELOR RD NW			<b>Transaction ID : SA17A.2446250</b> Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2016		
City MAGNOLIA	State OH	Zip Code 44643	Amount of Each Receipt this Period _____ 183.00 <input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C _____					
Name of Employer SPRINGWAY FARMS	Occupation FARMER				
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 419.53			

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 1433.00

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