

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)

Cruz for President

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

PLISKA, HAROLD, J., MR.,

Mailing Address 10745 SE 240TH PLACE

City

DAMASCUS

State

OR

Zip Code

97089-6510

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Transaction ID : SA17A.1696665

Date of Receipt

MM / DD / YYYY
04 / 22 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

POARCH, EDDIE, LEE, MR.,

Mailing Address 2112 SW 67TH ST

City

OKLAHOMA CITY

State

OK

Zip Code

73159-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.1695950

Date of Receipt

MM / DD / YYYY
04 / 22 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

100.00

☐ Memo Item

SEE REATTRIBUTION

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

POARCH, EDDIE, LEE, MR.,

Mailing Address 2112 SW 67TH ST

City

OKLAHOMA CITY

State

OK

Zip Code

73159-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.1712208B

Date of Receipt

MM / DD / YYYY
04 / 25 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

-100.00

☒ Memo Item

REATTRIBUTION TO SPOUSE

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

200.00

Total This Period (last page this line number only)