

# **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)

**BARR, JOHN, A, ,**

Mailing Address 1203 SHILLINGTON DRIVE

City  
KATY

State  
TX

Zip Code  
77450

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 ▼

500.00

**Transaction ID : SA17A.1036500**

Date of Receipt

**02 / 22 / 2018**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**BARR, JOHN, A, ,**

Mailing Address 1203 SHILLINGTON DRIVE

City  
KATY

State  
TX

Zip Code  
77450

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 ▼

600.00

**Transaction ID : SA17A.1038109**

Date of Receipt

**03 / 22 / 2018**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**BARRETT, BARBARA, , ,**

Mailing Address 4617 E OCOTILLO ROAD

City  
PARADISE VALLEY

State  
OH

Zip Code  
85253

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TRIPLE CREEK RANCH

Occupation  
OWNER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.1026673**

Date of Receipt

**03 / 02 / 2018**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

2900.00

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