

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)

HARRIS, WILLIAM, , ,

Mailing Address 2152 KINGS TREE WAY NW

City

ACWORTH

State

GA

Zip Code

30101

FEC ID number of contributing
federal political committee.

C

Name of Employer

MJC INC

Occupation

OWNER

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.1026866

Date of Receipt

M M / D D / Y Y Y Y
01 / 09 / 2018

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

HARRIS ADAMSE, SUZANNE, , ,

Mailing Address 7830 SE DOUBLE TREE DRIVE

City

HOBE SOUND

State

FL

Zip Code

33455

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE BERKLEY GROUP, INC.

Occupation

CORPORATE DIRECTOR OF DIGITAL
MARKETING

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.1029347

Date of Receipt

M M / D D / Y Y Y Y
02 / 19 / 2018

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

HARRISON, CHRISTOPHER, , ,

Mailing Address 3907 N FEDERAL HWY

City

POMPANO BEACH

State

FL

Zip Code

33064

FEC ID number of contributing
federal political committee.

C

Name of Employer

GSE INTL INC

Occupation

GROUND SUPPORT SALES

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Transaction ID : SA17A.1029390

Date of Receipt

M M / D D / Y Y Y Y
02 / 17 / 2018

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1000.00

Total This Period (last page this line number only)