

# **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)**

**ADKINS, SUSAN, , ,**

Mailing Address 201 WHITETHORN LN

City

GREENVILLE

State

SC

Zip Code

29607

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 ▼

10.00

**Transaction ID : SA17A.48199**

Date of Receipt

MM / DD / YYYY  
01 / 02 / 2020

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**ADKISON, ANGELA, , ,**

Mailing Address 1021 BLUEBIRD LN

City

ASHDOWN

State

AR

Zip Code

71822

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

BROOKSHIRES

Occupation

PHARMACIST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

**Transaction ID : SA17A.28224**

Date of Receipt

MM / DD / YYYY  
01 / 21 / 2020

EARMARKED THROUGH WINRED [SA17A.4358]

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**ADKISON, ANGELA, , ,**

Mailing Address 1021 BLUEBIRD LN

City

ASHDOWN

State

AR

Zip Code

71822

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

BROOKSHIRES

Occupation

PHARMACIST

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

**Transaction ID : SA17A.28225**

Date of Receipt

MM / DD / YYYY  
01 / 22 / 2020

EARMARKED THROUGH WINRED [SA17A.4359]

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

210.00

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