

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)

BERBER, TAMMY, , ,

Mailing Address 9142 O DAY DR

City
HIGHLAND

State
IN

Zip Code
46322

FEC ID number of contributing
federal political committee.

C

Name of Employer
ISDH

Occupation
NURSE SURVEYOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

35.00

Transaction ID : SA17A.29390

Date of Receipt

01 / 23 / 2020

EARMARKED THROUGH WINRED [SA17A.4360]

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

BERBER, TAMMY, , ,

Mailing Address 9142 O DAY DR

City
HIGHLAND

State
IN

Zip Code
46322

FEC ID number of contributing
federal political committee.

C

Name of Employer
ISDH

Occupation
NURSE SURVEYOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60.00

Transaction ID : SA17A.29391

Date of Receipt

01 / 28 / 2020

EARMARKED THROUGH WINRED [SA17A.4363]

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

BERCKMANN, BOB, , ,

Mailing Address 5729 HAYES ST

City
HOLLYWOOD

State
FL

Zip Code
33021

FEC ID number of contributing
federal political committee.

C

Name of Employer
AUTONATION

Occupation
VALET

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Transaction ID : SA17A.29393

Date of Receipt

01 / 10 / 2020

EARMARKED THROUGH WINRED [SA17A.4349]

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

85.00

Total This Period (last page this line number only)