

# **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)**

HOLMES, MARSHALL, , ,

Mailing Address PO BOX 864

City  
HESSTON

State  
KS

Zip Code  
67062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BUILDERS CONCRETE

Occupation  
DRIVER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

**Transaction ID : SA17A.71365**

Date of Receipt

MM / DD / YYYY  
01 / 11 / 2020

EARMARKED THROUGH WINRED [SA17A.4350]

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

HOLMES, PATTI, , ,

Mailing Address 310 CRESTVIEW LN

City  
HIDEAWAY

State  
TX

Zip Code  
75771

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CVS PHARMACY

Occupation  
RN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

**Transaction ID : SA17A.71367**

Date of Receipt

MM / DD / YYYY  
01 / 15 / 2020

EARMARKED THROUGH WINRED [SA17A.4352]

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

HOLMES, RICHARD, , ,

Mailing Address 8970 TIMBER RUN CT

City  
FORT MYERS

State  
FL

Zip Code  
33908

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 ▼

50.00

**Transaction ID : SA17A.71369**

Date of Receipt

MM / DD / YYYY  
01 / 15 / 2020

EARMARKED THROUGH WINRED [SA17A.4352]

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

160.00

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