

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12421 / 19910

<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)**

NEAL, PAMELA, , ,

Mailing Address 710 GREENFERN TRL

City  
SEYMOUR

State  
TN

Zip Code  
37865

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RIPLEYS ENTERTAINMENT

Occupation  
REVENUE CONTROL MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

**Transaction ID : SA17A.84601**

Date of Receipt

MM / DD / YYYY  
01 / 17 / 2020

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

NEAL, RICHARD, , ,

Mailing Address 19108 TRAILVIEW

City  
SAN ANTONIO

State  
TX

Zip Code  
78258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USAA

Occupation  
MEDICAL DIRECTOR

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.84603**

Date of Receipt

MM / DD / YYYY  
01 / 14 / 2020

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

NEAL, SAMUEL, , ,

Mailing Address PO BOX 8347

City  
CORPUS CHRISTI

State  
TX

Zip Code  
78468

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 ▼

1000.00

**Transaction ID : SA17A.84605**

Date of Receipt

MM / DD / YYYY  
01 / 19 / 2020

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1260.00

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