

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)

OSOWSKI, DEBRA, , ,

Mailing Address 6207 TREND ST

City

MAYVILLE

State

MI

Zip Code

48744

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.86179

Date of Receipt

MM / DD / YYYY
01 / 31 / 2020

EARMARKED THROUGH WINRED [SA17A.4382]

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

OSOWSKI, THOMAS, , ,

Mailing Address 69497 STATE ROAD 23

City

WALKERTON

State

IN

Zip Code

46574

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 ▼

35.00

Transaction ID : SA17A.86181

Date of Receipt

MM / DD / YYYY
01 / 09 / 2020

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

OSSIANI, MOHAMAD, , ,

Mailing Address 15 N BEACON ST

City

ALLSTON

State

MA

Zip Code

02134

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEWARD

Occupation

PHYSICIAN

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Transaction ID : SA17A.41199

Date of Receipt

MM / DD / YYYY
01 / 11 / 2020

EARMARKED THROUGH WINRED [SA17A.4350]

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

135.00

Total This Period (last page this line number only)