

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<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)

**Hillary for America**

**A.** Full Name (Last, First, Middle Initial)  
**Zoe Vanek**

Mailing Address 4015 Burnet Rd

City	State	Zip Code
Austin	TX	78756-3626

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	School Principal

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

**Transaction ID : C304244**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Amount of Each Receipt this Period

_____ 100.00
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**B.** Full Name (Last, First, Middle Initial)  
**Scott Piller**

Mailing Address 11740 Lady Anne Cir

City	State	Zip Code
Cape Coral	FL	33991-7539

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Specific Care Chiropractic	Chiropractic Physician

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : C167014**

Date of Receipt

M M / D D / Y Y Y Y
05 / 26 / 2015

Amount of Each Receipt this Period

_____ 2700.00
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**C.** Full Name (Last, First, Middle Initial)  
**Gene Stupnitsky**

Mailing Address 420 S Rossmore Ave

City	State	Zip Code
Los Angeles	CA	90020-4742

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Disney	Writer

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 350.00

**Transaction ID : C272044**

Date of Receipt

M M / D D / Y Y Y Y
06 / 24 / 2015

Amount of Each Receipt this Period

_____ 250.00
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**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 3050.00

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