

**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)
Denise Austin

Mailing Address 1311 Village Garden Dr

City	State	Zip Code
Missouri City	TX	77459-1514

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

Name of Employer	Occupation
Houston Methodist West Hospital	Registered Nurse

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 278.00

Transaction ID : C2497648

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	09	/	2016

Amount of Each Receipt this Period
 _____ 10.00

Memo Item

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

Mailing Address 7001 South Congress Ave. Apt# H -1

City	State	Zip Code
Austin	TX	78745

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

Name of Employer	Occupation
Disabled Veteran	Landscaper

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2027.15

Transaction ID : C2583518

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	12	/	2016

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 25 Murray St
 Apt 7G

City	State	Zip Code
New York	NY	10007-2361

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

Name of Employer	Occupation
Self-Employed	Film Festivals Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 265.00

Transaction ID : C2787458

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	22	/	2016

Amount of Each Receipt this Period
 _____ 25.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 285.00

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