

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)

Weld 2020 Presidential Campaign Committee, Inc.

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

Wright, Matthew, , ,

Mailing Address 1808 W Bramble Berry Ln

City
Phoenix

State
AZ

Zip Code
85085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sonoran Hospital Medicine, Plc

Occupation
Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1095.20

Transaction ID : A38DB895021C544DE914

Date of Receipt

MM / DD / YYYY
12 / 22 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Kranefuss, Lee, , ,

Mailing Address 200 Graduate Dr. PO 2370
PO 2370

City
Ketchum,

State
ID

Zip Code
83340

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Transaction ID : AA74EF6331172420484E

Date of Receipt

MM / DD / YYYY
12 / 22 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Coffin, Tim, , ,

Mailing Address 153 Perkins Row

City
Topsfield

State
MA

Zip Code
01983

FEC ID number of contributing
federal political committee.

C

Name of Employer
Breckinridge Capital

Occupation
Business

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Transaction ID : AF594127798DD412FB9B

Date of Receipt

MM / DD / YYYY
12 / 22 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

800.00

Total This Period (last page this line number only)