

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)

Bernie 2020

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

Folsom, Whitney, , ,

Mailing Address 20178 State Route 73

City

Mc Dermott

State

OH

Zip Code

45652-8928

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tcc

Occupation

Mental Health Therapist

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

667.00

Transaction ID : 20678708

Date of Receipt

M M / D D / Y Y Y Y
04 / 03 / 2020

Amount of Each Receipt this Period

27.00

☐ Memo Item

* Earmarked Contribution: See Below

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

ActBlue

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

914053.39

Transaction ID : 20678708E

Date of Receipt

M M / D D / Y Y Y Y
04 / 05 / 2020

Amount of Each Receipt this Period

27.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Foltz, Charmaine, , ,

Mailing Address 3463 Breezewood Ave

City

Eugene

State

OR

Zip Code

97405-5534

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nih

Occupation

Veterinarian

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

472.30

Transaction ID : 20707872

Date of Receipt

M M / D D / Y Y Y Y
04 / 04 / 2020

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

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

30.00

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