

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)

Fowns, Frank, , ,

Mailing Address 3466 N Newhall St

City

Milwaukee

State

WI

Zip Code

53211-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Transaction ID : 20673339

Date of Receipt

MM / DD / YYYY
04 / 06 / 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 : 20673339E

Date of Receipt

MM / DD / YYYY
04 / 06 / 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)

Fox, Bonnie, , ,

Mailing Address 1811 E West Rd
423C952

City

Honolulu

State

HI

Zip Code

96848-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer
University Of Hawaii At Manoa

Occupation
Lecturer

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

434.00

Transaction ID : 20662318

Date of Receipt

MM / DD / YYYY
04 / 02 / 2020

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

37.00

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