

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)

Smith, Sharon, , ,

Mailing Address 6248 Jasmine Ct

City

Commerce City

State

CO

Zip Code

80022-3342

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Airlines

Occupation
Food Production

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

542.57

Transaction ID : 20723923

Date of Receipt

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

Amount of Each Receipt this Period

10.00

☐ 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 : 20723923E

Date of Receipt

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

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Smith, Shawn, , ,

Mailing Address 330 S Pineapple Ave

City

Sarasota

State

FL

Zip Code

34236-7021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shms

Occupation
Software Engineer

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

593.10

Transaction ID : 20669647

Date of Receipt

M M / D D / Y Y Y Y
04 / 06 / 2020

Amount of Each Receipt this Period

6.00

☐ Memo Item

* Earmarked Contribution: See Below

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

16.00

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