

# **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)

Pete for America, Inc.

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

Haynes, Ashle, , ,

Mailing Address PO Box 755

City

Rancho Santa Fe

State

CA

Zip Code

92067-0755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

One Life Diet Inc

Occupation

COO

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3571.45

**Transaction ID : 842734**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 25 / 2019

Amount of Each Receipt this Period

- 771.45

☒ Memo Item

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

Haynes, Ashle, , ,

Mailing Address PO Box 755

City

Rancho Santa Fe

State

CA

Zip Code

92067-0755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

One Life Diet Inc

Occupation

COO

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3571.45

**Transaction ID : 842735**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 25 / 2019

Amount of Each Receipt this Period

771.45

☒ Memo Item

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

Haynes, Charles, , ,

Mailing Address 701 Fords Landing Way

City

Alexandria

State

VA

Zip Code

22314-3888

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 ▼

450.00

**Transaction ID : 835691**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 16 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

100.00

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