

# **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)

**Bullock for President**

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

**Walkup, John, Knox, ,**

Mailing Address 3710 Richland Ave

City  
Nashville

State  
TN

Zip Code  
37205-2438

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wyatt, Tarrant & Combs

Occupation  
Attorney

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : 2013015**

Date of Receipt

MM / DD / YYYY  
11 / 04 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**Rider, Mary, , ,**

Mailing Address 8333 Boone Blvd

City  
Kansas City

State  
MO

Zip Code  
64114-2423

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 ▼

500.00

**Transaction ID : 2032815**

Date of Receipt

MM / DD / YYYY  
12 / 04 / 2019

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**Chovanak, Lori, , ,**

Mailing Address 51 W Blenkner St

City  
Columbus

State  
OH

Zip Code  
43215-5692

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self employed

Occupation  
Nurse

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : 2013515**

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

365.00

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