

# **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)**

**Garrett, Patti, , ,**

Mailing Address 1412 Carling Dr  
Apt 201

City Saint Paul	State MN	Zip Code 55108-5336
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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 ▼

415.00

**Transaction ID : 2028087**

Date of Receipt

M M / D D / Y Y Y Y
11 / 20 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**Williams, Alexandra, , ,**

Mailing Address 109 Hasbrouck Rd

City New Paltz	State NY	Zip Code 12561-3531
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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 ▼

1062.00

**Transaction ID : 2028287**

Date of Receipt

M M / D D / Y Y Y Y
11 / 20 / 2019

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**McKenzie, Todd, , ,**

Mailing Address 17 Field Pt

City Dove Canyon	State CA	Zip Code 92679-3506
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FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gray West Construction

Occupation  
VP IT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : 2012887**

Date of Receipt

M M / D D / Y Y Y Y
10 / 31 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

65.00

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