

# **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)**

**Frost, Michael, , ,**

Mailing Address 118 NW Highland Dr

City  
Shoreline

State  
WA

Zip Code  
98177-8001

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 ▼

1650.00

**Transaction ID : 2021308**

Date of Receipt

**11 / 01 / 2019**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**Perrie, Sherry, , ,**

Mailing Address 8 Brightwood Rd

City  
Unionville

State  
CT

Zip Code  
06085-1005

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 ▼

2172.42

**Transaction ID : 2016708**

Date of Receipt

**10 / 22 / 2019**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**Campos, Sandra, , ,**

Mailing Address 4502 W Meadow Bend Dr

City  
Herriman

State  
UT

Zip Code  
84096-1213

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 ▼

458.00

**Transaction ID : 2017008**

Date of Receipt

**10 / 22 / 2019**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

130.00

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