

# **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)**

**Erway, Ronald, , ,**

Mailing Address 8108 E Fairmount Dr

City

Denver

State

CO

Zip Code

80230-6700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Bayer

Occupation

Sales Rep

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : 2025078**

Date of Receipt

MM / DD / YYYY  
11 / 13 / 2019

13

2019

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

**Fahrenkopf, Peter, , ,**

Mailing Address 603 Cahoon Ledges Dr

City

Bay Village

State

OH

Zip Code

44140-2191

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Shurtech

Occupation

Manager

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

470.71

**Transaction ID : 2031878**

Date of Receipt

MM / DD / YYYY  
12 / 03 / 2019

03

2019

Amount of Each Receipt this Period

5.00

☐

Memo Item

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

**Grant, Catherine, , ,**

Mailing Address 2001 WV Highway 5 E

City

Glenville

State

WV

Zip Code

26351-7614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

MHHS Grantsville WV

Occupation

physician

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

351.21

**Transaction ID : 2031978**

Date of Receipt

MM / DD / YYYY  
12 / 03 / 2019

03

2019

Amount of Each Receipt this Period

10.00

☐

Memo Item

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

115.00

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