

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)

Weld 2020 Presidential Campaign Committee, Inc.

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

Durand, Robert, A., ,

Mailing Address 39 Red Spring Rd

City

Marlborough

State

MA

Zip Code

01752-1383

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : AF874434D89544F06816

Date of Receipt

MM / DD / YYYY
06 / 28 / 2019

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Conard, Karen, S., ,

Mailing Address 11 Westwood Rd

City

Salem

State

NH

Zip Code

03079-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : A08B74061CA0D42BB990

Date of Receipt

MM / DD / YYYY
06 / 28 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Chayet, Martha, , ,

Mailing Address 29 Grant Street

City

Cambridge

State

MA

Zip Code

02138-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : AA5F9C19CA4854E11B64

Date of Receipt

MM / DD / YYYY
06 / 28 / 2019

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2250.00

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