

# **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)

Cory 2020

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

Ortiz, Rafael, , ,

Mailing Address PO Box 7775

City

San Francisco

State

CA

Zip Code

94120-7775

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Project YX

Occupation  
Executive

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : 1299654**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Smith, Barbara, , ,

Mailing Address 1900 Riviera Pkwy

City

Point Pleasant Boro

State

NJ

Zip Code

08742-4949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anthem

Occupation  
Registered Nurse

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

659.00

**Transaction ID : 1312554**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3414436.17

**Transaction ID : 1312554E**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2019

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

505.00

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