

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)
CARSON AMERICA

A. Full Name (Last, First, Middle Initial)
MRS. DRUSCILLA DOEHRMAN
Mailing Address **P.O. BOX 2165**

City State Zip Code
NAPLES FL 34106-2165

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Transaction ID : SA17.363256

Date of Receipt

08 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. DOEL
Mailing Address **734 BERKLEY STREET**

City State Zip Code
BERKLEY MA 02779-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer
**INFORMATION REQUESTED PER BEST
EFFORTS**

Occupation
**INFORMATION REQUESTED PER BEST
EFFORTS**

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17.315552

Date of Receipt

08 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM R. DOEL
Mailing Address **734 BERKLEY STREET**

City State Zip Code
BERKLEY MA 02779-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer
**INFORMATION REQUESTED PER BEST
EFFORTS**

Occupation
**INFORMATION REQUESTED PER BEST
EFFORTS**

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17.382840

Date of Receipt

08 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

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

700.00

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