

# **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)

Friends of Andrew Yang

**A. 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 ▼

13300809.50

**Transaction ID : 1335653E**

Date of Receipt

M M / D D / Y Y Y Y  
12 / 16 / 2019

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Davidson, Tal, , ,

Mailing Address 605 Chapman Ct

City

Santa Clara

State

CA

Zip Code

95050-6014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massage Therapy Shop

Occupation

Owner

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

459.70

**Transaction ID : 1528986**

Date of Receipt

M M / D D / Y Y Y Y  
12 / 23 / 2019

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

Davidson, Zane, , ,

Mailing Address 426 N Bent St

City

Powell

State

WY

Zip Code

82435-1831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Student

Occupation

Northwest College

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

633.78

**Transaction ID : 1054710**

Date of Receipt

M M / D D / Y Y Y Y  
10 / 07 / 2019

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

90.00

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