

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 319 / 4261

<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)

Julian for the Future

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

Faber, Dane, , ,

Mailing Address 164 San Carlos Ave

City
Sausalito

State
CA

Zip Code
94965-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Transaction ID : 513980

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

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 ▼

2352557.59

Transaction ID : 513980E

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2019

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Daniels, Nancy, , ,

Mailing Address 3142 Satellite Dr

City
San Antonio

State
TX

Zip Code
78217-4025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Nurse Practitioner

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

312.38

Transaction ID : 530480

Date of Receipt

M M / D D / Y Y Y Y
06 / 12 / 2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

105.00

Total This Period (last page this line number only)