

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)

Warren for President, Inc.

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

Best, Carolyn, , ,

Mailing Address 2125 Sawgrass St

City

Grove City

State

OH

Zip Code

43123-7572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Nursing Care Inc

Occupation

Registered Nurse

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Transaction ID : 5465432

Date of Receipt

M M / D D / Y Y Y Y
01 / 08 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

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 ▼

8943338.10

Transaction ID : 5465432E

Date of Receipt

M M / D D / Y Y Y Y
01 / 08 / 2020

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Best, Cindy, , ,

Mailing Address 9454 E Sandy Vista Dr

City

Scottsdale

State

AZ

Zip Code

85262-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Law Firm

Occupation

Attorney

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

635.20

Transaction ID : 5493694

Date of Receipt

M M / D D / Y Y Y Y
01 / 10 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

100.00

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