

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)

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 ▼

2125839.87

Transaction ID : 6828942E

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2020

Amount of Each Receipt this Period

28.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Schmidt, Jennifer, , ,

Mailing Address 942 Little Meadow Rd

City
Guilford

State
CT

Zip Code
06437-1683

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
CEO

Receipt For: 2020

☐ Primary ☐ General
☒ Other (specify) ▼
2020 Primary Debt

Election Cycle-to-Date ▼

399.12

Transaction ID : 6860876

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2020

Amount of Each Receipt this Period

92.48

☐ Memo Item

2020 Primary Debt

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

Schmidt, Lauren, , ,

Mailing Address 1967 Cross Creek Cir

City
De Pere

State
WI

Zip Code
54115-7424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aurora BayCare Medical Center

Occupation
Infection Preventionist

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.31

Transaction ID : 6834303

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2020

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

97.48

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