

# **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)

Biden for President

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

Mancuso, John, , ,

Mailing Address 37 Cunningham Dr

City  
New Smyrna Beach

State  
FL

Zip Code  
32168-5905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advantacare

Occupation  
Manager

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : 677613**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 09 / 2019

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

Mand, Brian, Curtis, ,

Mailing Address 4705 Boxwood Pl

City  
Atlanta

State  
GA

Zip Code  
30338-5688

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paradigm Four Inc.

Occupation  
Consultant/Author

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : 447809**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 25 / 2019

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

Mand, Daljit, , ,

Mailing Address 613 N Quebec St

City  
Kennewick

State  
WA

Zip Code  
99336-1081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolf Creek Nuclear Operating Corporati

Occupation  
Engineering

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : 828462**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

5850.00

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