

# **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)

Gillibrand 2020

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

Herz, Barbara, , ,

Mailing Address PO Box 211

City

Moose

State

WY

Zip Code

83012-0211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : 1063651**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**B. 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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2651396.00

**Transaction ID : 1063651E**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2019

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Hess, Miriam, , Ms.,

Mailing Address 145 E 15Th St

City

New York

State

NY

Zip Code

10003-3531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Siegel Strategies

Occupation

Consultant

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : 1058601**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2019

Amount of Each Receipt this Period

2700.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

2725.00

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