

# **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)

Hillary for America

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

Grant, Caroline, , ,

Mailing Address 1416 11th Ave

City

San Francisco

State

CA

Zip Code

94122-3605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Writer/Editor

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

**Transaction ID : C11183046**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2016

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Kingsland, Vicki, , ,

Mailing Address 874 Heritage Pl

City

Decatur

State

GA

Zip Code

30033-4104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
County Government Senior Citizens

Occupation  
Senior Citizen Center Manager

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

472.56

**Transaction ID : C11493386**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2016

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

O'Neill, James, , ,

Mailing Address 24 Scott Ct

City

Allendale

State

NJ

Zip Code

07401-1844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partner Engineering

Occupation  
CAD Manager

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

248.00

**Transaction ID : C11053306**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2016

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

300.00

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