

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)

Baker, Charles, A., III

Mailing Address 179 Clinton Rd

City

Brookline

State

MA

Zip Code

02445-5815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dewey Square Group

Occupation
Principal

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Transaction ID : 2961650

Date of Receipt

M M / D D / Y Y Y Y
04 / 24 / 2019

Amount of Each Receipt this Period

1800.00

☐ 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 ▼

15842062.99

Transaction ID : 2961650E

Date of Receipt

M M / D D / Y Y Y Y
04 / 24 / 2019

Amount of Each Receipt this Period

1800.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Baker, David, , ,

Mailing Address 2414 Las Hadas Ct

City

Fairfield

State

CA

Zip Code

94534-7123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

165.00

Transaction ID : 3002610

Date of Receipt

M M / D D / Y Y Y Y
04 / 28 / 2019

Amount of Each Receipt this Period

220.00

☐ Memo Item

* Earmarked Contribution: See Below Refund issued this period.

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

2020.00

Total This Period (last page this line number only)