

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)

Tulsi NOW, Inc.

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

Lucas, John, , , III

Mailing Address 5 Mize Pl

City

Greenwood

State

MS

Zip Code

38930-2369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenwood Leflore Hospital

Occupation

Surgeon

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Transaction ID : 1434005

Date of Receipt

M M / D D / Y Y Y Y
02 / 20 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution through ACTBLUE on 02/20/2020

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

Lucas, John, , , III

Mailing Address 5 Mize Pl

City

Greenwood

State

MS

Zip Code

38930-2369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenwood Leflore Hospital

Occupation

Surgeon

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : 1445255

Date of Receipt

M M / D D / Y Y Y Y
02 / 29 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution through ACTBLUE on 02/29/2020

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

Lucas, William, , ,

Mailing Address RR 1 Box 25

City

Kaunakakai

State

HI

Zip Code

96748

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

481.00

Transaction ID : 1415945

Date of Receipt

M M / D D / Y Y Y Y
02 / 06 / 2020

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution through ACTBLUE on 02/06/2020

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

105.00

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