

# **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)

**Obama for America**

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

**Christine Seyl**

Mailing Address 1511 N 39th St

City  
Seattle

State  
WA

Zip Code  
98103-8114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harborview Medical Center

Occupation  
RN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : C14340698**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 12 / 2012

Amount of Each Receipt this Period

100.00

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

**Ernest Pickett**

Mailing Address 16651 Lahser Rd Apt 201

City  
Detroit

State  
MI

Zip Code  
48219-4830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : C14516138**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 22 / 2012

Amount of Each Receipt this Period

60.00

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

**Alice Nedelec**

Mailing Address PO Box 10812

City  
Fort Mohave

State  
AZ

Zip Code  
86427-0812

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : C14178028**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 06 / 2012

Amount of Each Receipt this Period

200.00

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

360.00

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