

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)

Weld 2020 Presidential Campaign Committee, Inc.

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

Tiffany, Henry, , ,

Mailing Address PO Box 21049

City
Juneau

State
AK

Zip Code
99802-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Control Concepts , Inc.

Occupation
President

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Transaction ID : A0AC089225EB04D56961

Date of Receipt

MM / DD / YYYY
02 / 27 / 2020

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Miller, Mary, , ,

Mailing Address 7119 Santa Barbara Street

City
Carlsbad

State
CA

Zip Code
92011-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sharp Healthcare

Occupation
HIM Coder

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : AD47BF4C74B8243D698E

Date of Receipt

MM / DD / YYYY
02 / 27 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Nora, Richard, , ,

Mailing Address 1668 Hidden Creek Lane

City
Belvidere

State
IL

Zip Code
61008

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Transaction ID : AB445160A28754C708F3

Date of Receipt

MM / DD / YYYY
02 / 27 / 2020

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

200.00

Total This Period (last page this line number only)