

# **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)

Marianne Williamson for President

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

Williams, Sheila, , ,

Mailing Address 4107 NW 2nd Lane

City

Delray Beach

State

FL

Zip Code

33445

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Not Employed

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1025.00

Transaction ID : IDTA79511

Date of Receipt

M M / D D / Y Y Y Y  
05 / 06 / 2019

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

ActBlue

Mailing Address 366 Summer Street

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2892670.11

Transaction ID : INCA4218IDTA79511

Date of Receipt

M M / D D / Y Y Y Y  
05 / 06 / 2019

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

Williams, Thomasina, , ,

Mailing Address 501 N. Orlando Avenue, #313-303

City

Winter Park

State

FL

Zip Code

32789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thomasina Williams

Occupation  
Consultant

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Transaction ID : IDTA104571

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1500.00

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