

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)

Tom Steyer 2020

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

Kanter-Levy, Melinda, , ,

Mailing Address 143 Saint Thomas Way

City

Tiburon

State

CA

Zip Code

94920-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marin Day Schools

Occupation

Teacher

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

302.69

Transaction ID : 1936918

Date of Receipt

M M / D D / Y Y Y Y
01 / 10 / 2020

Amount of Each Receipt this Period

100.00

☐ 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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

557591.32

Transaction ID : 1936918E

Date of Receipt

M M / D D / Y Y Y Y
01 / 12 / 2020

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Kelly, Patricia, , ,

Mailing Address 3406 Clay St

City

San Francisco

State

CA

Zip Code

94118-2009

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 ▼

237.00

Transaction ID : 1919658

Date of Receipt

M M / D D / Y Y Y Y
01 / 02 / 2020

Amount of Each Receipt this Period

1.00

☐ Memo Item

* Earmarked Contribution: See Below

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

101.00

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