

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2873 / 3291

<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)**

Toledo, Sonia, , ,

Mailing Address 3050 Corlear Avenue, Apt. 307

City  
Bronx

State  
NY

Zip Code  
10464

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dignity of Children

Occupation  
Education

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1125.00

**Transaction ID : IDTA378635**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 03 / 2020

Amount of Each Receipt this Period

50.00

☐ 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 ▼

7521812.97

**Transaction ID : INCA20905IDTA378635**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 05 / 2020

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Tomasek, Nancy, , ,

Mailing Address 64 Smith Farm Road

City  
Amston

State  
CT

Zip Code  
06231

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 ▼

457.78

**Transaction ID : IDTA321390**

Date of Receipt

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

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

60.00

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