

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)

Friends of John Delaney

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

Eberhardt, Nancy, , ,

Mailing Address 5212 King William Rd

City

Richmond

State

VA

Zip Code

23225-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pathwise Partners

Occupation
Consultant

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Transaction ID : 614230

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2019

Amount of Each Receipt this Period

1000.00

☐ 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 C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

427340.63

Transaction ID : 614230E

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2019

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Edson, Rick, , ,

Mailing Address 4405 E West Hwy
Ste 309

City

Bethesda

State

MD

Zip Code

20814-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Executive

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Transaction ID : 614116

Date of Receipt

M M / D D / Y Y Y Y
08 / 26 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

1500.00

Total This Period (last page this line number only)