

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

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

FOR LINE NUMBER:  
(check only one)

<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)

Biden for President

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

Byrne, Paul, , ,

Mailing Address 351 California St

Ste 600

City

San Francisco

State

CA

Zip Code

94104-2404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CORNERSTONE LAW GROUP

Occupation

Attorney

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Transaction ID : 4323954

Date of Receipt

M M / D D / Y Y Y Y  
04 / 08 / 2020

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

Byrne, Sally, , ,

Mailing Address 6021 FM 1390

City

Kaufman

State

TX

Zip Code

75142-6201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4330.00

Transaction ID : 4419846

Date of Receipt

M M / D D / Y Y Y Y  
04 / 29 / 2020

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

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 ▼

28864146.40

Transaction ID : 4419846E

Date of Receipt

M M / D D / Y Y Y Y  
04 / 29 / 2020

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

5.00

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