

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)

Hillary for America

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

Pat Boatwright

Mailing Address 1725 W Harrison St

City	State	Zip Code
Chicago	IL	60612-3841

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation
Obstetrician/Gynecologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1530.00

Transaction ID : C4183675

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2016

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Jennifer Hooshangi

Mailing Address 10816 Antigua Ter
Apt 201

City	State	Zip Code
Rockville	MD	20852-5517

FEC ID number of contributing federal political committee.

C

Name of Employer
EM Solutions

Occupation
Assistant Controller

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Transaction ID : C4119215

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2016

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Lucille Anderson

Mailing Address 182 Christie Ave

City	State	Zip Code
Clifton	NJ	07011-1856

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation
CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Transaction ID : C4441225

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

250.00

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