

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)

Pete for America, Inc.

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

Hurst, James, , ,

Mailing Address 780 E Michigan St
Unit 41

City
Orlando

State
FL

Zip Code
32806-4677

FEC ID number of contributing
federal political committee.

C

Name of Employer
EviCore

Occupation
Operations

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

354.36

Transaction ID : 2546563

Date of Receipt

M M / D D / Y Y Y Y
01 / 18 / 2020

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

B. 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 ▼

3690908.28

Transaction ID : 2546563E

Date of Receipt

M M / D D / Y Y Y Y
01 / 19 / 2020

Amount of Each Receipt this Period

3.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Newland, Helen, , ,

Mailing Address 1001 Scarlet Bend Ct

City
Kirkwood

State
MO

Zip Code
63122-6950

FEC ID number of contributing
federal political committee.

C

Name of Employer
BJC HealthCare

Occupation
Pharmacist

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2293.29

Transaction ID : 2546863

Date of Receipt

M M / D D / Y Y Y Y
01 / 19 / 2020

Amount of Each Receipt this Period

38.00

☐ Memo Item

* Earmarked Contribution: See Below

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

41.00

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