

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)

Rodriguez, Diane, , ,

Mailing Address 37 James St

City

East Longmeadow

State

MA

Zip Code

01028-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hwrsd

Occupation

Teacher

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

876.55

Transaction ID : 2475638

Date of Receipt

MM / DD / YYYY
01 / 09 / 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 : 2475638E

Date of Receipt

MM / DD / YYYY
01 / 09 / 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)

Brown, Debora, , ,

Mailing Address 4650 Kestrel Rd

City

Billings

State

MT

Zip Code

59106-9533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Retail Owner/Yoga Teacher

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

Transaction ID : 2475738

Date of Receipt

MM / DD / YYYY
01 / 09 / 2020

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

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

6.00

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