

# **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)

Biden for President

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

Cox, Chris, , ,

Mailing Address 1040 5Th Ave

City  
New York

State  
NY

Zip Code  
10028-0137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cadwalader Wickersham & Taft LLP

Occupation  
Attorney

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : 1542864**

Date of Receipt

M M / D D / Y Y Y Y  
11 / 13 / 2019

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

Cox, Claudette, , ,

Mailing Address 530 N St SW  
Apt S206

City  
Washington

State  
DC

Zip Code  
20024-4555

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cox & Associates

Occupation  
Congressional Relations

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : 1454230**

Date of Receipt

M M / D D / Y Y Y Y  
11 / 05 / 2019

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

Cox, Clifford, , ,

Mailing Address 375 Austin Ave

City  
Port Orchard

State  
WA

Zip Code  
98366-4621

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 ▼

500.00

**Transaction ID : 1947298**

Date of Receipt

M M / D D / Y Y Y Y  
12 / 29 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

3450.00

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