

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)

Gilden, Janice, , ,

Mailing Address 2824 Pinelawn Dr

City

La Crescenta

State

CA

Zip Code

91214-1348

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

511.00

Transaction ID : 1985996

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2019

31

2019

Amount of Each Receipt this Period

5.00

☐ 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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

13215722.55

Transaction ID : 1985996E

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2019

31

2019

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Giles, Andrea, , ,

Mailing Address 543 E Monroe St

City

Powell

State

WY

Zip Code

82435-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

211.00

Transaction ID : 1736459

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2019

10

2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

10.00

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