

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55547 / 83081

<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)

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 : 1331411E

Date of Receipt

MM / DD / YYYY
10 / 17 / 2019

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Perry, Kim, , ,

Mailing Address 123 Henshaw Ave

Spc 704

City

Chico

State

CA

Zip Code

95973-7237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Therapeutic Solutions

Occupation

LCSW

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Transaction ID : 1599571

Date of Receipt

MM / DD / YYYY
11 / 20 / 2019

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

C. 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 : 1599571E

Date of Receipt

MM / DD / YYYY
11 / 21 / 2019

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

15.00

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