

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)

Amy for America

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 C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10183182.40

Transaction ID : 970883E

Date of Receipt

MM / DD / YYYY
11 / 04 / 2019

Amount of Each Receipt this Period

75.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Kant, Kotagal, , ,

Mailing Address 4157 Paddock Rd

City
Cincinnati

State
OH

Zip Code
45229-1610

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 ▼

250.00

Transaction ID : 974083

Date of Receipt

MM / DD / YYYY
11 / 04 / 2019

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

Cohn, Andrew, , ,

Mailing Address 29 Jameson Rd

City
Newton

State
MA

Zip Code
02458-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Longwood medical energy collaborative

Occupation
Executive

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : 974383

Date of Receipt

MM / DD / YYYY
11 / 04 / 2019

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

250.00

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