

# **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)

**Bullock for President**

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

**Swig, Richard, ,**

Mailing Address 400 Spear St  
Ste 106

City  
San Francisco

State  
CA

Zip Code  
94105-1691

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RSBA & Associates

Occupation  
Consultant

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : 1977178**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 16 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**Carroll, Terri, K.,**

Mailing Address 2103 Spring Creek Dr

City  
Laramie

State  
WY

Zip Code  
82070-4865

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : 1988878**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**Caldwell, Merrilee, ,**

Mailing Address 160 Brownell Howland Rd

City  
Santa Fe

State  
NM

Zip Code  
87501-8805

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not Employed

Occupation  
Retired

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : 1965078**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

1000.00

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