

SCHEDULE A-P **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 28932 / 50201

<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)

Friends of Andrew Yang

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

Mills, Marie, , ,

Mailing Address 4430 Bermuda Dr

City

Sugar Land

State

TX

Zip Code

77479-2131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Bend Isd

Occupation

Nurse

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

681.00

Transaction ID : 1602045

Date of Receipt

M M / D D / Y Y Y Y
01 / 16 / 2020

Amount of Each Receipt this Period

15.00

☐ 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

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5627452.54

Transaction ID : 1602045E

Date of Receipt

M M / D D / Y Y Y Y
01 / 16 / 2020

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Mills, Marie, , ,

Mailing Address 4430 Bermuda Dr

City

Sugar Land

State

TX

Zip Code

77479-2131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Bend Isd

Occupation

Nurse

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.00

Transaction ID : 1662559

Date of Receipt

M M / D D / Y Y Y Y
01 / 23 / 2020

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

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

30.00

Total This Period (last page this line number only)