

# **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)

Pete for America, Inc.

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

Walsh, Susan, F, ,

Mailing Address 4117 Harvey Ave

City

Western Springs

State

IL

Zip Code

60558-1245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : 1359777**

Date of Receipt

MM / DD / YYYY  
08 / 19 / 2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Walsh, Tom, , ,

Mailing Address 2106 N 52Nd St

City

Seattle

State

WA

Zip Code

98103-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Of Washington

Occupation  
Scientist

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.24

**Transaction ID : 1464230**

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2019

Amount of Each Receipt this Period

10.00

☐ 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 C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14461590.68

**Transaction ID : 1464230E**

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2019

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

510.00

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