

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)

Marianne Williamson for President

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

Toledo, Sonia, , ,

Mailing Address 3660 Waldo avenue apt 5L

City
Bronx

State
NY

Zip Code
10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dignity of Children

Occupation
Education

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Transaction ID : IDTA267766

Date of Receipt

M M / D D / Y Y Y Y
10 / 20 / 2019

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

ActBlue

Mailing Address 366 Summer Street

City
Somerville

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7373871.73

Transaction ID : INCA17779IDTA267766

Date of Receipt

M M / D D / Y Y Y Y
10 / 20 / 2019

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Toledo, Sonia, , ,

Mailing Address 3050 Corlear Avenue, Apt. 307

City
Bronx

State
NY

Zip Code
10464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dignity of Children

Occupation
Education

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1075.00

Transaction ID : IDTA270139

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2019

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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