

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)

Inslee for America

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

Walkinshaw, Jean, , ,

Mailing Address 1303 E Lynn St

City

Seattle

State

WA

Zip Code

98102-4007

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Transaction ID : 733391

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2019

24

2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

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

ACTBLUE

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1314541.15

Transaction ID : 733391E

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2019

24

2019

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Wallace, Carol, , ,

Mailing Address 18009 Couch Market Rd

City

Bend

State

OR

Zip Code

97703-9224

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : 734435

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2019

25

2019

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

750.00

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