

SCHEDULE A-P **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<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)

Biden for President

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

Grinager, John, , ,

Mailing Address 1606 Diane Rd

City

Mendota Heights

State

MN

Zip Code

55118-3626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Approve-It Inc.

Occupation
Manager

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : 3607859

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2020

Amount of Each Receipt this Period

50.00

☐ 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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

35830810.88

Transaction ID : 3607859E

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2020

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Grinde, Julie, K., ,

Mailing Address 6145 Silver Hills Dr

City

Manitowoc

State

WI

Zip Code

54220-9328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Teacher

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : 3360548

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2020

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

350.00

Total This Period (last page this line number only)