

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Biden for President

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

Kohman, Leslie, , ,

Mailing Address 500 Kimber Rd

City  
Syracuse

State  
NY

Zip Code  
13224-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUNY

Occupation  
Physician

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : 2848115**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 02 / 2020

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 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 : 2848115E**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 02 / 2020

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Kohman, Leslie, , ,

Mailing Address 500 Kimber Rd

City  
Syracuse

State  
NY

Zip Code  
13224-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUNY

Occupation  
Physician

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : 2848693**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 02 / 2020

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

260.00

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