

# **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)**

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 : 2805901E**

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.

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

Ludwig, Valerie, , ,

Mailing Address 5058 State Highway 161

City  
Torrington

State  
WY

Zip Code  
82240-7813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : 3677116**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2020

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Ludy, Carmen, , ,

Mailing Address 2109 Wallingford Rd

City  
Ann Arbor

State  
MI

Zip Code  
48104-4523

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Not Employed

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : 3136858**

Date of Receipt

M M / D D / Y Y Y Y  
03 / 09 / 2020

Amount of Each Receipt this Period

150.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

250.00

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