

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)

Bernie 2020

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

Clark, Linda, , ,

Mailing Address 2870 W 235Th St

Apt 16

City

Torrance

State

CA

Zip Code

90505-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

319.00

Transaction ID : 11519196

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2019

Amount of Each Receipt this Period

7.00

☐ Memo Item

* Earmarked Contribution: See Below

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

ActBlue

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16798442.69

Transaction ID : 11519196E

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2019

Amount of Each Receipt this Period

7.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Clark, Linda, , ,

Mailing Address 2870 W 235Th St

Apt 16

City

Torrance

State

CA

Zip Code

90505-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

319.00

Transaction ID : 11523600

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2019

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

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

10.00

Total This Period (last page this line number only)