

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)

Julian for the Future

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

Cuprill, Ana, , ,

Mailing Address 19265 NE Crestwood Ct

City
Poulsbo

State
WA

Zip Code
98370-8540

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 ▼

220.00

Transaction ID : 916844

Date of Receipt

MM / DD / YYYY
12 / 28 / 2019

Amount of Each Receipt this Period

20.00

☐ 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 ▼

2477859.84

Transaction ID : 916844E

Date of Receipt

MM / DD / YYYY
12 / 30 / 2019

Amount of Each Receipt this Period

20.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

Diaz, Maria, Elena, ,

Mailing Address 984 S Ynez Ave

City
Monterey Park

State
CA

Zip Code
91754-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Garfield Medical Center

Occupation
Registered Nurse

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

241.00

Transaction ID : 916944

Date of Receipt

MM / DD / YYYY
12 / 29 / 2019

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

25.00

Total This Period (last page this line number only)